

FEDERAL BUREAU OF INVESTIGATION

U.S. DEPARTMENT OF JUSTICE

APPLICATION FOR APPOINTMENT

DIRECTOR,

FEDERAL BUREAU OF INVESTIGATION,  
U.S. DEPARTMENT OF JUSTICE,  
Washington, D.C.

4103 3rd St.N.W. Washington, D.C.

May 1st, 1937.

SIR:

I hereby make application for appointment to the position indicated by check mark, in the Federal Bureau of Investigation, U.S. Department of Justice, and for your use in this connection submit the following information:

Special Agent..... ☐  
Special Agent (Accountant)..... ☐  
Stenographer..... ☐  
Typist..... ☒  
Messenger..... ☒  
Jr. Stenographer..... ☒  
(Indicate by check)

(This application should be typewritten if possible)

1. Name in full (please print) Bly Herman Olin  
(Family name) (Given name) (Middle name)

(a) Female applicants must furnish maiden name .....

2. Legal residence 352 Fairview Ave. Winchester, Virginia

3. Mail and telegraphic address 4105 3rd St. N.W. Washington, D. C. AD 0338

4. Date of birth 7/12/1913 Weight 140 lbs. Height 5'10 1/2" Color White

5. Place of birth Vencluse, Virginia

6. (a) Father's name Jesse Franklin Bly (b) Father's birthplace Shenandoah Co. Va.

7. (a) Mother's maiden name Vernie Keller (b) Mother's birthplace Shenandoah Co. Va.

8. If you were not born in United States, how long have you lived here? .....

9. Are you a citizen of the United States? Yes

10. If naturalized, date and place of naturalization .....

11. Are you single, married, widowed, separated, or divorced? Single (Specify)

12. If your husband (or wife) is employed, state where employed .....

13. Number of children, if any 20 12 13 14

14. Are you entirely dependent on your salary? Yes

15. To what extent are you financially indebted to others and to whom? .....

National Metropolitan Bank - \$132.50 - Borrowed on personal account of a depositor. Payment is made, however, to the bank.

This is the only debt over \$5.00 owed by myself, except current tuition at National University

## 16. Education: (Please print.)

	NAME AND LOCATION OF SCHOOL	FROM—	TO—	COURSES PURSUED, DIPLOMAS OR DEGREES RECEIVED
(a) Elementary	<del>Completed Elementary schooling</del> John Kerr - Winchester, Va.	1919	1927	Completed
(b) High school equivalent	John Handley High School "	1928	1932	Completed (Academic)
(c) College or technical	John Handley High School	1932	1933	Completed
One year Post Graduate (Business)				
Law	National University (Wash.D.C.)	1935	Present	
	(Will get degree in June 1938)			
(d) Miscellaneous				
Correspondence Law	(Extension University) Chicago Illinois	1933	1935	Not completed
Note: The reason for stopping correspondence study of law was due to Virginia changing the bar requirements.				

17. Give names of clubs, societies, and other similar organizations of which you are a member:

I am "Master of the Rolls" in Sigma Nu Phi (Legal) International  
Fraternity.

18. Are you physically capable of discharging the duties of the position sought? (Any physical defects should be fully described) Yes

19. Health record for the past 3 years (give number of days of illness and nature of ailments):

I have lost about seven days from work during the past three years  
due entirely to some illness resulting from ordinary colds, such as  
one attack of laryngitis and one attack of bronchitis.

## 20. Experience: (Please print.)

NAME AND ADDRESS OF EMPLOYER	POSITION	FROM—	TO—	ANNUAL SALARY
A. & P. Tea Co. (Winchester, Va.)	Part Time Clerk	1930	1933	25¢ an hr.
"	Learning	June	October	
Weaver (Virginia Woolen Company)	Wool Industry	1933	1933	\$90.00 Mo.
Virginia Woolen Company (Winchester)	In complete Charge of pay-roll and handled correspondence	October 1933	August 1935	\$840.00
Washington Gas Light Company (Wash.)	Stenographer and Sales contact	August 1935	Present	\$ 1380.00
Note: The \$840.00 in the town of Winchester, Va. goes as far as the \$1380.00 in Washington, D.C.				

I left the semi-executive position in Winchester, Va. only because I desired to study law in Washington, after Virginia Bar requirements were changed.

21. Have you ever been arrested? —No.

Specify: \_\_\_\_\_

22. Have you ever been a defendant in any court action? —No.

Specify: \_\_\_\_\_

23. Give five personal references (not relatives, former employers, fellow employees, or school teachers), more than 30 years of age, who are householders or property owners, business or professional men or women (including your family physician, if you have one) of good standing in the community, and who have known you well during the past 5 or more years. (Please print.)

NAME	RESIDENCE ADDRESS	NUMBER OF YEARS ACQUAINTED	BUSINESS ADDRESS
1. (Mayor) Dr. Chas. R. Anderson	Winchester, Va.	12 yrs	Winchester, Va.
2. (Judge) Phillip Williams	Winchester, Va.	14 yrs	Winchester, Va.
3. John H. Rosenberger (Lumber Exec)	Winchester, Va.	10 yrs	Winchester, Va.
4. John. I. Sloat (Banker)	Winchester, Va.	7 yrs	Winchester, Va.
5. (Former Mayor) F.A. Shyrock	Winchester, Va.	10 yrs	Winchester, Va.

24. List the names of any relatives now in the Government service, with the degree of relationship, and where employed:

X (Uncle) Attorney W. W. Keller (Title Research Division) State of Virginia

25. What is the lowest entrance salary you will accept? Sufficient amount to allow me  
~~to continue study of law.~~

26. Are you in a position to accept probationary employment at any time, without previous notice, and, if notice is required, how much? No. Would need about 30 days. (At least six mos.)  
If satisfactory.

27. In the event of appointment will you be willing to proceed to Washington, D.C., upon 10 days' notice and at your own expense? Refer to question 26

28. If appointed are you willing and prepared to accept assignment or transfer to any part of the United States where services are required, for either temporary or permanent duration? Not at present

29. Attach unmounted face photograph not larger than 3 by 4¼ inches. Write your name plainly on back of photograph. Photograph to be taken not more than 30 days prior to date of application.



Respectfully,

*Herman O. Bly.*  
(Signature of applicant as usually written)

NOTE.—If the applicant desires to make any further remarks or statements concerning his qualifications or in answer to any question contained in the application, the same should be made on a separate sheet of paper, numbering the remarks in accordance with the original questions.

NOTE.—The following jurat must be subscribed to by all applicants for positions in the Federal Bureau of Investigation, U.S. Department of Justice.

Subscribed and duly sworn to before me by the above-named applicant, this Sixth day of May, 1937, at city (or town) of Washington, county of Columbia, and State (or Territory or District) of D.C.

[OFFICIAL IMPRESSION SEAL]

*Wm. Jackson*  
(Signature of officer)  
*Notary Public*  
(Official title)



FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

APPLICATION FOR APPOINTMENT

DIRECTOR,

FEDERAL BUREAU OF INVESTIGATION,  
UNITED STATES DEPARTMENT OF JUSTICE,  
WASHINGTON, D. C.

Sir:

I hereby make application for appointment to the position indicated by check mark, in the Federal Bureau of Investigation, United States Department of Justice, and for your use in this connection submit the following information:

Special Agent (Law Trained) ☒ 2  
Special Agent (Accountant) ☐  
Stenographer ☐  
Typist ☐  
Messenger ☐  
Laboratory Technician\* ☐  
Student Fingerprint Classifier ☐  
(Indicate by check)

(This application should be typewritten if possible)

1. Name in full (please print) Bly Herman Olin  
(Family name) (Given name) (Middle name)
- (a) Female applicants must furnish maiden name \_\_\_\_\_
2. Legal residence 352 Fairview Ave. Winchester, Virginia (Political)  
230 Rhode Island Ave. Washington, D.C. (Present)
3. Mail and telegraphic address 230 Rhode Island Ave. N.E. Dupont 8760  
Washington, D.C. Phone No. \_\_\_\_\_
4. Date of birth 7/12/13 Weight 148 Height 5'10 1/2" Color White  
(Without Shoes)
5. Place of birth Vaucluse, Virginia
6. (a) Father's name Jesse Franklin Bly (b) Father's birthplace Shenandoah Co. Virginia
7. (a) Mother's maiden name Vernie Mae Keller (b) Mother's birthplace Shenandoah Co. Virginia
8. If you were not born in United States, how long have you lived here? \_\_\_\_\_
9. Are you a citizen of the United States? Yes
10. If naturalized, date and place of naturalization \_\_\_\_\_
11. Are you single, married, widowed, separated, or divorced? Married  
(Specify)
12. If your husband (or wife) is employed, state where employed Not employed
13. Number of children, if any None
14. Are you entirely dependent on your salary? Yes
15. To what extent are you financially indebted to others and to whom? Total amount \$220.00  
\$180.00 G.M.A.C. 1940 Pontiac  
20.00 Sears & Roebuck \$20.00 Clean Rite Vacuum Cleaner Co.

\*Specify exact title of position sought as Laboratory Technician -

See details on separate description sheets which will be furnished on request.

16. Education: (Please print.)

	NAME AND LOCATION OF SCHOOL	FROM	TO	COURSES PURSUED, DIPLOMAS OR DEGREES RECEIVED
(a) Elementary	John Kerr and John Handley Winchester, Va.	1920	1928	Completed 8 grades
(b) High school equivalent	John Handley High School Winchester, Va.	1928	1932	Academic Diploma
1 Yr Post Grad.	John Handley High School Winchester, Va.	1932	1933	Commercial Diploma
(c) College or technical	National Law University Washington, D.C.	1933	1938	L.L.B. Degree
(d) Miscellaneous				

17. Give names of clubs, societies, and other similar organizations of which you are a member:

Sigma Nu Phi International Legal Fraternity

District Bar Association.

18. Have you been admitted to the Bar; if so specify Admitted Dist. Court of Appeals  
June 1939

19. Describe any physical defects, including extent of defective vision, if any

None

20. Health record for the past 3 years (give number of days and nature of serious illness):

Streptococcus throat infection in Feb. 1938 (10 days) Removed tonsils June 1939

Since Feb. 1938 have not missed more than eight days from work. No serious illness.

\* Applicants for Laboratory Technician positions should list in detail scientific courses pursued, using an insert if necessary and give title of any Master's or Doctor's Thesis prepared.

21. Experience: (Please print.)

NAME AND ADDRESS OF EMPLOYER	POSITION AND KIND OF WORK	FROM	TO	ANNUAL SALARY
Name - A & P Tea Company Address - Winchester, Va.	Part Time Also Summer Vac.	1930	1933	Approx. \$400.00
Name - Va. Woolen Company Address - Winchester, Va.	Weaver	June 1933	Oct. 1933	Approx. 960.00
Name - Va. Woolen Company Address - Winchester, Va.	Office Work in charge of 500 employees payroll Etc.	Oct. 1933	Aug. 1935	840.00
Name - Washington Gas Light Co. Address - Washington, D.C.	Stenographer	Aug. 1935	June 1937	1380.00
Name - Washington Gas Light Co. Address - Washington, D.C.	Clerical Supervisor	June 1937	Feb. 1939	1740.00
Name - Washington Gas Light Co. Address - Washington, D.C.	Salesman	Feb. 1939	to present	2800.00
Name Address				
Name Address				
Name Address				
Name Address				

22. Specify any arrests (include traffic arrests)

None

23. Have you ever been a defendant in any court action?

No

Specify:

24. Give five personal references (not relatives, former employers, fellow employees, or school teachers), more than 30 years of age, who are householders or property owners, business or professional men or women (including your family physician, if you have one) of good standing in the community, and who have known you well during the past 5 or more years. (Please print.)

NAME	RESIDENCE ADDRESS	NUMBER OF YEARS ACQUAINTED	BUSINESS ADDRESS
1. Mayor C.R. Anderson M.D.	Winchester, Virginia	15 yrs	City Court House
2. Judge Philip Williams	Winchester, Virginia	18 yrs	City Court House
3. Godfrey L. Munter	Washington, D.C.	5 yrs	Shoreham Building
4. John H. Rosenberger	Winchester, Virginia 3285 Worthington St.	15 yrs	Rosenberger Lumber Co.
5. William E. Stansbury	Washington, D.C.	5 yrs	Globe Ind. Ins. Co.

25. List the names of any relatives now in the Government service, with the degree of relationship, and where employed:

Uncle (Walter W. Keller) <sup>attorney</sup> Making abstracts of Federal Parks, Shenandoah and others in Virginia.

26. What is the lowest entrance salary you will accept? 3200.00

27. Are you in a position to accept probationary employment at any time, without previous notice, and, if notice is required, how much? Yes - two weeks notice.

28. In the event of appointment will you be willing to proceed to Washington, D.C., upon 10 days' notice and at your own expense? Yes

29. If appointed are you willing and prepared to accept assignment or transfer to any part of the United States where services are required, for either temporary or permanent duration? Yes

30. Attach unmounted face photograph not larger than 3 by 4 inches. Write your name plainly on back of photograph. Photograph to be taken not more than 30 days prior to date of application.



Respectfully,

Herman O. Bly  
(Signature of applicant as usually written)

NOTE.—If the applicant desires to make any further remarks or statements concerning his qualifications or in answer to any question contained in the application, the same should be made on a separate sheet of paper, numbering the remarks in accordance with the original questions.

NOTE.—The following jurat must be subscribed to by all applicants for positions in the Federal Bureau of Investigation, U.S. Department of Justice.

Subscribed and duly sworn to before me by the above-named applicant, this 7th day of June, 1940, at city (or town) of Washington, D.C., county of Columbia, and State (or Territory or District) of Columbia.

[OFFICIAL IMPRESSION SEAL]

Walter Smith  
(Signature of officer)  
Henry P. ...  
(Official title)

UNITED STATES CIVIL SERVICE COMMISSION

CERTIFICATE OF MEDICAL EXAMINATION UNDER EXECUTIVE ORDER, SEPT. 4, 1924

(APPLICANT MUST FILL IN DOTTED LINES BELOW TO HEAVY LINE)

Herman A. Boly  
(Name)  
4105 3rd St. N.W. Wash. D.C.  
(Post-office address)  
Male  
(Sex)  
7/12/1913  
(Date of birth)

What examination did you take? Typist

In what Department and Bureau are you to be employed? F. B. I.

In what City or Town are you to be employed? Wash. D.C.

(PHYSICIAN SHOULD FILL IN THE FOLLOWING)

69 5/8 inches. \* 138 3/4 pounds.  
(Height, without shoes) (Weight, in clothing) (Weight, without clothing)  
Males, without clothing; females, clothed but without wrap or hat.

Items checked (✓) were examined and found normal. Deviations from normal are noted. (See instructions on back of sheet)

1. Eyes: Distant vision: Without glasses: Right 20-2 Left 20-2 With glasses if worn: Right 20 Left 20  
(Near vision must be reported; use space provided on back of this form.)  
Evidence of disease or injury: Right ✓ Left ✓  
Color vision ✓ Method of testing color vision C.P.
2. Ears: (Consider denominators indicated here as normal. Record as numerators the actual distance heard.) Ordinary conversation: Right ear 20 Left ear 20  
20 ft. 20 ft.  
Evidence of disease or injury: Right ear ✓ Left ear ✓
3. Nose ✓
4. Mouth ✓
5. Throat ✓
6. Thyroid (especially in women) ✓
7. Heart ✓ If organic heart disease is present, is it fully compensated? denied
8. Lungs: Right ✓ History of tuberculosis denied  
Left ✓ has it been arrested for 1 year? no
9. Inguinal rings (men only): Right ✓ Is truss worn? no  
Left ✓ (Any hernia should be noted, inguinal, ventral, femoral, etc.)
10. Varicose veins ✓ Varicocele ✓  
(If "Yes", state location and degree)
11. Flat foot ✓ Impairment of function none  
(None, moderate, severe)
12. Deformities, atrophies, and other abnormalities, diseases, or defects not included above ✓
13. Scars of serious injury or disease ✓
14. Nervous system (give symptoms and history) denied
15. Urinalysis (see over) ✓ Venereal disease ✓
16. Has applicant ever received pension, compensation, allowance, retired pay, or training because of disability received while in military or naval service? no If "Yes", describe disability and state whether present now \_\_\_\_\_

17. In my opinion, applicant is capable of performing duties involving moderate physical exertion:  
(Arduous, moderate, or light)

5/6/37  
(Place of examination) The examining physician must be in the Federal service  
Albert E. Pagan  
(Name of examining physician)  
aa Surg  
(Title, and branch of Federal medical service)

\*For males, to be taken only upon special written request of the official ordering examination.

This report is to be returned to the official of the U. S. Civil Service Commission requesting the examination

The aim of the Executive order of Sept. 4, 1924, and of this examination thereunder is to obtain information as to the physical condition of appointees to the classified civil service with a view to promoting efficiency and minimizing accidents and claims under United States employees' compensation laws.

### NOTES FOR EXAMINING PHYSICIAN

**WEIGHT.**—Males, without clothing, and also in ordinary clothing without overcoat or hat (weigh twice); females, clothed but without wrap or hat. If overweight, state whether due to bone and muscle or to fat.

**HEIGHT.**—Without boots or shoes; observe that no appliances are used to increase.

*The examination should include the following observations, as to—*

1. **EYES.**—Ptosis; discharge; corneal scar; pterygium. In recording distant vision consider 20 feet as normal and report all vision as a fraction with 20 feet as numerator and the smallest type read at 20 feet as denominator. If glasses are used, record for each eye the finding with and without glasses.\*

2. **EARS.**—Evidence of middle ear or mastoid disease; condition of drums; discharge. In recording hearing, record 20 feet as normal distance for conversational voice and record deviation from normal as fraction with 20 as denominator and actual distance as numerator.

3. **NOSE.**—Ability to blow through each nostril. If free, a speculum examination would not be indicated.

4. **MOUTH.**—Missing teeth, pyorrhea.

5. **THROAT.**—Tonsils, hypertrophy or disease.

6. **THYROID.**—Presence of tumor in neck and tremor, exophthalmos; nervous high-strung disposition, especially in women.

7. **HEART.**—Murmurs. State whether functional or organic. If valvular disease exists, state whether or not it is fully compensated.

8. **LUNGS.**—It is necessary that the auscultatory cough be used. Tuberculosis; if present, state whether active or arrested, and if arrested your opinion as to how long it has been quiescent. Sputum to be examined for tubercle bacilli in all suspected cases.

9. **INGUINAL RINGS.**—Hernia; no hernia, but impulse on coughing; no hernia or impulse, but abnormally large rings. Any other hernia should be noted, and if present describe fully and state whether it is retained by well-fitting truss.

10 to 13. Scars, deformities, atrophies, paralyses, or flat foot of such a nature as to incapacitate or become aggravated by work or be later alleged as caused by accident or occupation. By "flat foot", as used in this form, is meant a foot with impaired function, the term being equivalent to "fallen or misplaced arch", an abnormal condition. Impairment of function is the point to be noted. [REDACTED] blemishes which might be referred to as marks of identification be recorded.

14. **THE [REDACTED] HISTORY** of any mental or nervous abnormality.

15. Urine [REDACTED] be taken when especially indicated, particularly in persons over 40 when arteriosclerosis, nephritis, or diabetes is suspected.

Record, if taken—Urinalysis—Sp. gr. \_\_\_\_\_ Albumen \_\_\_\_\_ Sugar \_\_\_\_\_

Blood pressure: Mm. Hg. systolic 120 Mm. Hg. diastolic 80

If tachycardia is present, give pulse rate: Sitting \_\_\_\_\_ Immediately after exercise \_\_\_\_\_ Two minutes after exercise \_\_\_\_\_

REMARKS: \_\_\_\_\_

*Albert E. Pagan*  
(Name of examining physician)

*aa Surg USPH*  
(Title, and branch of medical service)

\*Near vision.

What is the longest and the shortest distance at which the paragraph below can be read by applicant: Test each eye separately.

{ Without glasses R. 4 in. to 30 in. With glasses, if used R. \_\_\_\_\_ in. to \_\_\_\_\_ in.  
L. 4 in. to 30 in. L. \_\_\_\_\_ in. to \_\_\_\_\_ in.

With the view of promoting health and efficiency and of minimizing accidents among Federal employees, the heads of the several executive departments and independent establishments having a medical personnel are directed to make such physical examinations of applicants for and employees in the Federal classified service as may be requested by the Civil Service Commission or its authorized representatives.  
This order will supplement the Executive orders of May 29 and June 18, 1923 (Executive order September 4, 1924).  
Jaeger L; Baellen .60; Dioptric 37 D.

Examined for position in—

Department \_\_\_\_\_

Bureau \_\_\_\_\_

Title of position \_\_\_\_\_

Number of certificate upon which applicant's name appears \_\_\_\_\_

## UNITED STATES CIVIL SERVICE COMMISSION

## CERTIFICATE OF MEDICAL EXAMINATION UNDER EXECUTIVE ORDER, SEPT. 4, 1924

(APPLICANT MUST FILL IN DOTTED LINES BELOW TO HEAVY LINE)

Herman A. Kelly  
(Name)  
4105 3rd St. N.W. Wash. D.C.  
(Post-office address)  
Male (Sex) 7/12/1913 (Date of birth)  
What examination did you take? Typist  
In what Department and Bureau are you to be employed? F. B. I.  
In what City or Town are you to be employed? Wash. D.C.

Rolled print, right forefinger  
(Print must be taken to identify person)

(Unless the examining physician can guarantee the identity of the person examined, the fingerprint must be furnished. Indelible ink or stamp past should be used)

(PHYSICIAN SHOULD FILL IN THE FOLLOWING)  
69 5/8 inches \* 138 3/4 pounds.  
(Height, without shoes) (Weight, in clothing) (Weight, without clothing)  
Males, without clothing; females, clothed but without wrap or hat.

Items checked (✓) were examined and found normal. Deviations from normal are noted. (See instructions on back of sheet)

1. Eyes: Distant vision: Without glasses: Right 20-2 Left 20-2 With glasses if worn: Right 20 Left 20  
(Near vision must be reported; use space provided on back of this form.)  
Evidence of disease or injury: Right ✓ Left ✓  
Color vision ✓ Method of testing color vision C.P.
2. Ears: (Consider denominators indicated here as normal. Record as numerators the actual distance heard.) Ordinary conversation: Right ear 20 Left ear 20  
80 ft. 80 ft.  
Evidence of disease or injury: Right ear ✓ Left ear ✓
3. Nose ✓
4. Mouth ✓
5. Throat ✓
6. Thyroid (especially in women) ✓
7. Heart ✓ If organic heart disease is present, is it fully compensated? denied  
History of tuberculosis denied  
has it been arrested for 1 year? ✓
8. Lungs: Right ✓ Left ✓
9. Inguinal rings (men only): Right ✓ Left ✓ Is truss worn? no  
(Any hernia should be noted, inguinal, ventral, femoral, etc.)
10. Varicose veins ✓ (If "Yes", state location and degree) Varicocoele ✓
11. Flat foot ✓ Impairment of function none  
(None, moderate, severe)
12. Deformities, atrophies, and other abnormalities, diseases, or defects not included above ✓
13. Scars of serious injury or disease ✓
14. Nervous system (give symptoms and history) denied
15. Urinalysis (see over) ✓ Venereal disease ✓
16. Has applicant ever received pension, compensation, allowance, retired pay, or training because of disability received while in military or naval service? no If "Yes", describe disability and state whether present now no

17. In my opinion, applicant is capable of performing duties involving moderate physical exertion.  
(Arduous, moderate, or light)  
5/6/37 (Date of examination)  
The examining physician must be in the Federal service  
Albert E. Pagan (Name of examining physician)  
as Surg. WSPH (Title, and branch of Federal medical service)

\*For males, to be taken only upon special written request of the official ordering examination.

This report is to be returned to the official of the U. S. Civil Service Commission requesting the examination

The aim of the Executive order of Sept. 4, 1924, and of this examination thereunder is to obtain information as to the physical condition of appointees to the classified civil service with a view to promoting efficiency and minimizing accidents and claims under United States employees' compensation laws.

#### NOTES FOR EXAMINING PHYSICIAN

**WEIGHT.**—Males, without clothing, and also in ordinary clothing without overcoat or hat (weigh twice); females, clothed but without wrap or hat. If overweight, state whether due to bone and muscle or to fat.

**HIGHT.**—Without boots or shoes; observe that no appliances are used to increase.

The examination should include the following observations, as to—

1. **EYES.**—Ptosis; discharge; corneal scar; pterygium. In recording distant vision consider 20 feet as normal and report all vision as a fraction with 20 feet as numerator and the smallest type read at 20 feet as denominator. If glasses are used, record for each eye the finding with and without glasses.\*

2. **EARS.**—Evidence of middle ear or mastoid disease; condition of drums; discharge. In recording hearing, record 20 feet as normal distance for conversational voice and record deviation from normal as fraction with 20 as denominator and actual distance as numerator.

3. **NOSE.**—Ability to blow through each nostril. If free, a speculum examination would not be indicated.

4. **MOUTH.**—Missing teeth, pyorrhea.

5. **THROAT.**—Tonsils, hypertrophy or disease.

6. **THYROID.**—Presence of tumor in neck and tremor, exophthalmos; nervous high-strung disposition, especially in women.

7. **HEART.**—Murmurs. State whether functional or organic. If valvular disease exists, state whether or not it is fully compensated.

8. **LUNGS.**—It is necessary that the auscultatory cough be used. Tuberculosis; if present, state whether active or arrested, and if arrested your opinion as to how long it has been quiescent. Sputum to be examined for tubercle bacilli in all suspected cases.

9. **INGUINAL RINGS.**—Hernia; no hernia, but impulse on coughing; no hernia or impulse, but abnormally large rings. Any other hernia should be noted, and if present describe fully and state whether it is retained by well-fitting truss.

10 to 13. Scars, deformities, atrophies, paralyses, or flat foot of such a nature as to incapacitate or become aggravated by work or be later alleged as caused by accident or occupation. By "flat foot", as used in this form, is meant a foot with impaired function, the term being equivalent to "fallen or misplaced arch", an abnormal condition. Impairment of function is the point to be noted. It is not intended that small, insignificant blemishes which might be referred to as marks of identification be recorded.

14. This entry should include symptoms and full history of any mental or nervous abnormality.

15. Urinalysis to be made and blood pressure to be taken when especially indicated, particularly in persons over 40 when arteriosclerosis, nephritis, or diabetes is suspected.

Record, if taken—Urinalysis—Sp. gr. \_\_\_\_\_ Albumen \_\_\_\_\_ Sugar \_\_\_\_\_

Blood pressure: Mm. Hg. systolic 120 Mm. Hg. diastolic 80

If tachycardia is present, give pulse rate: Sitting \_\_\_\_\_ Immediately after exercise \_\_\_\_\_ Two minutes after exercise \_\_\_\_\_

REMARKS: \_\_\_\_\_

Albert E. Pagan  
(Name of examining physician)  
as Surg USPH  
(Title, and branch of medical service)

\*Near vision.  
What is the longest and the shortest distance at which the paragraph below can be read by applicant: Test each eye separately.

Without glasses, R. 4 in. to 30 in. With glasses, if used, R. \_\_\_\_\_ in. to \_\_\_\_\_ in.  
L. 4 in. to 30 in. L. \_\_\_\_\_ in. to \_\_\_\_\_ in.

With the view of promoting health and efficiency and of minimizing accidents among Federal employees, the heads of the several executive departments and independent establishments having a medical personnel are directed to make such physical examinations of applicants for and employees in the Federal classified service as may be requested by the Civil Service Commission or its authorized representatives.  
This order will supplement the Executive orders of May 29 and June 18, 1923 (Executive order September 4, 1924), January 1; Division 30; Division 27 D.

Examined for position in—

Department \_\_\_\_\_

Bureau \_\_\_\_\_

Title of position \_\_\_\_\_

Number of certificate upon which applicant's name appears \_\_\_\_\_



# FEDERAL BUREAU OF INVESTIGATION

Form No. 1

THIS CASE ORIGINATED AT **WASHINGTON, D.C.**

**CHICAGO** FILE NO. **67-2039**

REPORT MADE AT <b>CHICAGO, ILLINOIS</b>	DATE WHEN MADE <b>May 11, 1937</b>	PERIOD FOR WHICH MADE <b>May 11, 1937</b>	REPORT MADE BY <b>C. A. GANNON</b> <b>CAG:JMS</b>
TITLE <b>HERMAN O. BLY</b>			CHARACTER OF CASE <b>APPLICANT - TYPIST LESSENER</b>

**SYNOPSIS OF FACTS:**

Applicant enrolled LaSalle Extension University Chicago, Illinois 2/6/34 for course in law; partially completed. Received grade of 79 in Contracts; 75 in Quasi contracts; no examination taken in Agency; failure in Negligence, passed on re-examination. \$83.00 still owing on course; last payment July, 1935. Debt now in hands of RICHARD HARMAN, attorney, Washington, D.C. for collection.

R.U.C.

**REFERENCE:** Telegram from the Bureau dated May 10, 1937.

**DETAILS:** At the LaSalle Extension University, 41st and Michigan Avenue, Chicago, Illinois LEROY C. BRYANT exhibited an enrollment card of applicant which showed that he was 20 years of age at the time of enrollment February 6, 1934, and was working for the Virginia Woolen Company as invoice payroll correspondent. His guardian was listed as MRS. J. F. BLY and the address originally given was 352 Fairview Avenue, Winchester, Va. A later address was given as 945 Longfellow Street, Washington, D.C.

The record card showed that the applicant received the following grades: Examination in Contracts taken September 19, 1934 - grade 79; examination in Quasi contracts October 9, 1934 - 75; examination in Agency was not taken; examination in Negligence May 7, 1935 - D (failure); re-examination taken May 17, 1935 in Negligence was passed with a grade of A (90 to 100).

APPROVED AND FORWARDED: <i>D. M. Ladd</i> <i>a. j.</i>	SPECIAL AGENT IN CHARGE	DO NOT WRITE IN THESE SPACES	
COPIES OF THIS REPORT Bureau - 3 (Air mail-Spec. Del.) Wash. Fd. - 2 Chicago - 2		10	

The enrollment card showed that of the total of \$197.00 for the complete course, \$83.00 still remained unpaid and no payment had been made since July 1935. A notation on the card showed that the account was in the hands of RICHARD HARMAN, Evans Building, Washington, D.C. for collection. According to a letter received from HARMAN dated April 20, 1937 he stated that BLY had promised to come to see him but had never done so and that he (HARMAN) did not know where BLY was working.

REFERRED UPON COMPLETION TO OFFICE OF ORIGIN.

# TELETYPE

Mr. Tolson  
Mr. E.A. Tamm  
Mr. Clegg  
Mr. Coffey  
Mr. Dawson  
Mr. Egan  
Mr. Foxworth  
Mr. Glavin  
Mr. Harbo  
Mr. Joseph  
Mr. Lester  
Mr. Nichols  
Mr. Quinn  
Mr. Schilder  
Mr. Tamm  
Mr. Tracy  
Miss Gandy

FBI RICHMOND

5-12-37

10-30 AM IJ

DIRECTOR

PHONE. HERMAN O BLY TYPIST MESSENGER APPLICANT BLY BORN JULY TWELFTH  
NINETEEN THIRTEEN VANCLAUSE VIRGINIA GRADUATED JOHN HANDLEY  
WINCHESTER VIRGINIA JUNE NINETEEN THIRTY TWO ALSO POSTGRADUATE WORK  
WXX SAME SCHOOL DRIXXX DURING THIRTY TWO AND THIRTY THREE STOP  
SCHOLASTIC GRADES ABOVE AVERAGE POSTGRADUATE WORK OF STENOGRAPHIC  
NATURE WITH EXCELLENT GRADES ATTENDANCE AND DEPARTMENT EXCELLENT  
NEIGHBORHOOD WINCHESTER EXCELLENT REFERENCES RECOMMEND APPLICANT  
HIGHLY ADVISING HE IS INDUSTRIOUS CONSCIENTIOUS INTELLIGENT AND  
EXTREMELY HONEST AND SINCERE EMPLOYMENT WITH VIRGINIA WOOLEN MILL  
COMPANY FROM JUNETHIRTY THREE UNTIL AUGUST THIRTY FIVE SATISFACTORY  
HOWEVER APPLICANT WAS APPARENTLY DISSATISFIED WITH THE WORK. NO  
CREDIT RATING OR CRIMINAL RECORD WINCHESTER.

BERENS

END

OK FBI WASHINGTON DC GG

# FEDERAL BUREAU OF INVESTIGATION

Form No. 1

THIS CASE ORIGINATED AT **WASHINGTON, D. C.**

FILE NO. **67-7592**

REPORT MADE AT <b>WASHINGTON, D. C.</b>	DATE WHEN MADE <b>5/15/37</b>	PERIOD FOR WHICH MADE <b>5/12, 14/37</b>	REPORT MADE BY <b>W. M. MORRIS</b> <span style="float: right;">WMM:FLB</span>
TITLE  <b>HERMAN O. BLY</b>			CHARACTER OF CASE  <b>APPLICANT - TYPIST - MESSENGER</b>

**SYNOPSIS OF FACTS:** Applicant born July 12, 1913. Attending National University Law School, since September, 1935, and has maintained average of over 85%. Employed by Washington Gas Light Co. since August 5, 1935. No record of employment with A. and P. Tea Co. available. Landlady considers applicant satisfactory tenant. Applicant has no credit record, but is indebted to Charles A. Cogan in amount of \$132.50. Has no criminal record in District of Columbia.

- P -

**REFERENCE:**

Bureau letter dated May 10, 1937, addressed to Washington Field Office, (file 67-99243).  
Teletype from Richmond Field Office, dated May 11, 1937, to Washington Field Office.

**DETAILS:**

AT WASHINGTON, D. C.

MISS PAULINE DOWRICK, Registrar's Office, National University Law School, advised that applicant's scholastic record reflected that he entered the Law School September 23, 1935 and that since that time he has maintained an average of over 85% in all subjects. She advised that the applicant is pursuing the LLB degree course and is taking a full course. She stated that his record also indicates that he was graduated from John Handley School, Winchester, Va.; that his age at that time was 22 years, and that his present address is 4105 - 3rd Street, N. W. His tuition has been paid to date.

APPROVED AND FORWARDED: <i>[Signature]</i> SPECIAL AGENT IN CHARGE	DO NOT WRITE IN THESE SPACES	
COPIES OF THIS REPORT 3 - Bureau 2 - Washington Field <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">           Routed ..... Indexed .....            Searched ..... Recorded .....            Numbered ..... Checked .....            Serialized ..... Filed .....         </div>	<b>67-99243-13</b>	<b>MAY 19 1937</b>
	<b>MAY 17 A.M.</b>	
	<i>[Signature]</i>	

MRS. C. P. BALLOW, 4105 - 3rd Street, N. W., stated that applicant has been a roomer in her home for about 1 year; that he came from 4103 - 3rd Street, N. W., having been recommended to her by the former occupants of that residence. She stated that he occupies a room with another boy and that he takes his breakfast at the house. She also advised that he originally came from Winchester, Va., and that he appears to be a clean cut, quiet and ambitious person and to her knowledge does not drink.

MISS C. A. DUNKLEY, Employment Office, Washington Gas Light Co., 411 - 10th Street, N. W., advised, after consulting the records, that applicant has been employed there since August 5, 1935 in the Sales Department as a Stenographer. She declined to state the salary that he was receiving. The record reflected that applicant's full name is Herman Olin Bly and that his date of birth was July 12, 1913.

MR. J. SLAUGHTER, in charge of the Sales Department at the Washington Gas Light Co., stated that applicant has been under his supervision since coming there; that he has worked both as a stenographer and as a contact man in the sales room. Mr. Slaughter stated that applicant is intelligent, honest and meets people well; that he has always been very punctual and in his opinion applicant is an ambitious person who deserves a position which would offer better chances of advancement. He recommends applicant for the position sought.

MR. G. S. SMITH, in the Personnel Section of the A. and P. Tea Co., was telephonically communicated with and he advised that his records did not disclose the name of applicant. He stated that records of temporary employees were not maintained prior to the year 1936.

MR. F. E. HILDEBRAND, National Metropolitan Bank, 613 - 15th Street, N. W., advised that applicant is not indebted to the bank, but that a note in the amount of \$159, signed by applicant, in favor of Charles A. Cogan, on March 3, 1937, had been deposited in the bank for collection. Mr. Hildebrand advised that applicant, according to the agreement, was to pay \$13.25 per month and that to date he has made the required number of payments and reduced the original debt to the amount of \$132.50.

Applicant has no credit rating at Stone's Mercantile Agency, 1419 - H Street, N. W.

MR. AMEROSE DURKIN, Record Clerk, Metropolitan Police Headquarters, advised that his files did not disclose the name of applicant.

- PENDING -

# FEDERAL BUREAU OF INVESTIGATION

Form No. 1  
THIS CASE ORIGINATED AT **WASHINGTON, D. C.**

FILE NO. **67-14**

REPORT MADE AT <b>RICHMOND, VA.</b>	DATE WHEN MADE <b>5-31-37</b>	PERIOD FOR WHICH MADE <b>5-11-37</b>	REPORT MADE BY <b>A. HALE WATKINS      AHW:VG</b>
TITLE <b>HERMAN O. BLY</b>			CHARACTER OF CASE <b>APPLICANT - TYPIST</b>

**SYNOPSIS OF FACTS:** Applicant born July 12, 1913 Vanclause, Va.; graduated John Handley High School, Winchester, Va., June 1932, also postgraduate work same school during 1932-33. Scholastic grades above average, postgraduate work of stenographic nature with excellent grades; attendance and deportment excellent; neighborhood Winchester, excellent. References recommend applicant highly, advising he is industrious, conscientious, intelligent and extremely honest and sincere. Employment with Virginia Woolen Mills Company from June 1933 until August 1935 satisfactory, however, applicant was apparently dissatisfied with the work. No credit rating or criminal record Winchester.

*Briggs*  
*6/3/37*  
*wvg*

R.U.C.

**REFERENCE:** Telegram from Bureau dated May 10, 1937.

**DETAILS:** At WINCHESTER, VIRGINIA:

Records in the office of the John Handley High School reflect that the applicant attended that institution from September 1928 until June 1932 and was graduated on the latter date. The same records also reflect that the applicant took a postgraduate course at that school during the school year of 1932-33. The records further reflect that the applicant was born July 12, 1913 at Vanclause, Virginia, a small community near Winchester.

APPROVED AND FORWARDED: <i>[Signature]</i> SPECIAL AGENT IN CHARGE	DO NOT WRITE IN THESE SPACES	
COPIES OF THIS REPORT  3 - Bureau 2 - Washington Field 2 - Richmond	<b>67-94243-14</b>	<b>JUN 10 1937</b>

These records reflect the applicant was never tardy during the time he attended the school and that his conduct and deportment was excellent. His absences were less than average according to the interpretation placed upon them by school officials. Teachers at the school who recalled the applicant personally, advised that they remembered him as an industrious and quiet young man, being a better than average student and that in so far as their recollection served, they could recommend him without reservation. The record indicated that during his postgraduate course he took commercial work including typing and shorthand and that his scholastic standing for this and the regular high school course was above average.

Investigation in the various A & P Tea Company stores in Winchester, Virginia failed to reveal anyone who personally recalled the applicant working there as a part time clerk from 1930 to 1933. One employee, however, informed that he vaguely recalled the applicant as being so employed and that it was his recollection that he had worked in different stores in the town depending upon where extra help was needed. It was learned in the event the applicant had been employed at any time and in any capacity by the A & P Tea Company at Winchester, the record concerning this employment could be secured from the Personnel Department of that company, 805 Channing Place, N.C., Washington, D. C. This information was furnished the Washington Field Division by telegram on May 11, 1937 and no lead is being set forth for the office of origin to complete this investigation inasmuch as it is assumed that this lead has been covered by this time.

At the Virginia Woolen Mills Company, Winchester, it was determined that the applicant had been employed at that place as a weaver from June until October 1933 and as a payroll clerk, also handling general correspondence from October 1933 until August 1935. The records did not disclose his salary as a weaver, however, he received \$75. per month for the office work. The records of that company reflect his birth as July 12, 1913. The records indicate that the applicant left the employ of that company on August 3, 1935 of his own volition.

Mr. James W. Bowman, Superintendent of that company, advised that the applicant was under his supervision when employed as a weaver and that his services were entirely satisfactory. Mr. J. C. Oakes, who was office manager and immediate supervisor of the applicant while he did the office work, was not available for interview inasmuch as he is now a comptroller of the company and was out of the city, not being expected to return for a period of ten days, at the time of the conducting of this investigation.

Brief interviews were had with the other employees in the office who were working there at the time the applicant was employed by that company. They described the applicant as being a very pleasant individual who handled his work in a rapid and efficient manner and that in all respects the work was entirely satisfactory. They informed, however, that the applicant was apparently not satisfied with the work because of the future outlook and that he left voluntarily in order to accept a position with the Washington Gas and Light Company at Washington, D. C. so that he might go to night school and thus better his own condition.

Dr. Charles R. Anderson, Mayor of the City of Winchester, informed that he had been the family doctor of the Bly family during almost the entire life of the applicant. He described Bly as being a deserving young man with high character and morals, who enjoyed exceptionally good health and had always lived a clean and fine life. Dr. Anderson stated that the applicant had all the benefits that might be offered from fine family environment even though his family was of very modest means. He stated that the applicant was trustworthy, honest and dependable, that he was very aggressive and exceptionally hard worker and an ambitious young man. Dr. Anderson concluded by stating that he could recommend the applicant without reservation.

Judge Philip Williams, Judge of the Circuit Court at Winchester, informed that he had known the boy during his entire life. He stated that when the boy was yet a youngster he sold magazines, papers and candy and had always been industrious and attempted to aid his mother. Judge Williams informed that the applicant's father was now deceased and had been incapacitated for several years prior to his death and that the mother had always had a very hard time in providing a living for herself and four sons, one of whom is the applicant. He also stated that for a period of years the applicant served as his caddie at the Winchester Country Club. Judge Williams described the applicant as being a serious minded, honest, dependable and trustworthy boy and one who would make a reputation for himself in the business world. He stated that the applicant's mother was an intelligent, fine and likeable woman and that all her sons had helped her during her financial trouble and that the older men, particularly, in Winchester had always manifested a great interest in Mrs. Bly and her children, particularly the applicant.

Mr. John H. Rosenberger who operates a large lumber yard in Winchester and Mr. John I. Sloat, Cashier of the Commercial and Savings Bank, Winchester, both substantiated and reiterated the information furnished by Dr. Anderson and Judge Williams as set forth above. These references advised that the applicant had always had to fight for a living and that he and his brothers were all "hustlers" and "Didn't have a lazy bone in their body". Mr. F. A. Shyroek, former Mayor of the City of Winchester and who is presently employed as a salesman for the Siler Vinegar Company, was not in the city and was not expected to return for a period of one week. In view of this fact and due to emergency matters, Mr. Shyroek will not be interviewed unless the Bureau specifically requests it. A neighborhood investigation was conducted in the vicinity of the applicant's home at 352 Fairview Avenue, Winchester which resulted in the information that the applicant and his family are greatly respected in the City of Winchester. The applicant has three brothers, one older and two younger than himself and all four boys have always worked and helped their mother during their financial difficulties. The father had been sick for a number of years prior to his death and the boys have always been very close to their mother. The mother has done sewing for various people in the City of Winchester and it is quite apparent that she is held close to the hearts of all who know her there. The family, including the applicant, are all members of the Southern Methodist Church and while located in that city the applicant was active in the Church and Sunday School work at that Church.



At the Winchester Credit Bureau it was determined that the applicant has no credit rating at their office. At the Winchester Police Department it was determined that the applicant has no criminal record with that Department.

REFERRED UPON COMPLETION TO THE DIVISION OF ORIGIN.

JOHN EDGAR HOOVER  
DIRECTOR

WRG:EAC

**Federal Bureau of Investigation**  
**United States Department of Justice**  
**Washington, D. C.**

June 3, 1937.

BRIEF OF INVESTIGATION

Re: HERMAN O. BLY -  
Typist-Messenger Applicant.

Typing Test: 87 1/2%  
Stenographic ability.

Age: 23  
Single

High School Graduate  
1 year - Post-graduate course  
2 years - National University

EDUCATION

John Handley High School,  
Winchester, Va., 1928-1932,  
post graduate course, 1932-1933.

Applicant's scholastic standing was above average. Teachers who recalled applicant advised that they remembered him as an industrious and quiet young man, being a better than average student and in so far as their recollection served, they could recommend him without reservation.

LaSalle Extension University,  
Chicago, Ill., 1933-1935.

Applicant received the following grades in examinations: Contracts, 79; Quasi Contracts, 75; examination in Agency not taken; Negligence, D (failure), re-examination passed with a grade of A (90 to 100). Applicant still owes \$83.00 and no payment has been made since July 1935. The account is now in the hands of Richard Harman, Washington, D.C., for collection. According to a letter received from Mr. Harman dated April 20, 1937, he stated that applicant had promised to come to see him but had never done so and Mr. Harman did not know where applicant was working.

National University, D.C.,  
since 1935.

Applicant has maintained an average of over 85% in all subjects.

EXPERIENCE

A and P Tea Co., Winchester, Va.,  
Clerk, part time 1930-1933.

Investigation in the various A and P stores failed to reveal anyone who personally recalled applicant. However, one employee advised that he vaguely recalled applicant as being employed in different stores depending upon where extra help was needed.

Virginia Woolen Mills Co.,  
Winchester, Va., Weaver,  
June to Oct. 1935; Payroll and  
Corres. Clerk, Oct. 1933 to Aug. 1935.

Mr. Bowman, Superintendent, advised that applicant's services were entirely satisfactory. Employees interviewed described applicant as being a very pleasant individual who handled his work in a rapid and efficient manner. They informed, however, that applicant was apparently not satisfied with the work because of the future outlook and left voluntarily in order to accept a position with the Washington Gas and Light Company.

Washington Gas Light Co., D.C.,  
Stenographer and Sales Contact Man,  
since August 1935.

Mr. Slaughter, in charge of the Sales Department, advised that applicant is intelligent, honest and meets people well; he is an ambitious person who deserves a position which would offer better chances of advancement. Mr. Slaughter recommends applicant for the position sought.

Searched .....  
Numbered .....  
Serialized .....  
Filed .....

67-99243-15  
JUN 10 1937  
FEDERAL BUREAU OF INVESTIGATION  
U. S. DEPARTMENT OF JUSTICE  
TOLSON  
FOUR  
CHIEF CLERK  
FILE

REFERENCES

Dr. Chas. R. Anderson, Mayor,  
Judge Philip Williams, Judge  
of Circuit Court,  
John H. Rosenberger, Operator of  
lumber yard,  
John I. Sloat, Cashier, Commercial  
and Savings Bank,  
F. A. Shyroek, former Mayor,  
All Winchester, Va.

Recommended applicant highly. Mr. Shyroek was not  
available for interview.

RELATIVES IN GOVERNMENT SERVICE

None.

MISCELLANEOUS

Neighborhood investigation.

Favorable.

Born July 12, 1913,  
Vaucluse, Va.

Verified by school and employment records.

Indebted -

National Metropolitan Bank,  
D.C., \$132.50.

Satisfactory.

Personal interview with  
Special Agent J. B. Shiley.

Reports that applicant presents a very good personal  
appearance and approach, is well poised and possesses  
assurance. He seems to be energetic and ambitious,  
and his only fault seems to be that he thinks just a bit too much of himself. It is thought,  
however, that when he has completed his law education he may make a good prospect for a  
Special Agent's position. It is believed that his ego may be decreased somewhat if he is  
given an opportunity in the Bureau and given to understand that it is necessary to sub-  
ordinate the will of the individual to the will of the Bureau. Recommendation - favorable.

OUTSTANDING ENDORSERS

None.

Applicant's physical report has been received which discloses that he is 69 5/8  
inches in height and 138 3/4 pounds in weight. The examining physician recommends applicant  
for duties involving moderate physical exertion.

*W. R. Glavin*  
W. R. Glavin.

*Noted  
9*

*Kerrison O. Bay*

PHYSICAL EXAM.

RECORDED

67-99243-20

~~JUL 11 1940~~

JUL 5 1940

Don't	
See: cl	<i>fb</i>
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*ONE CLK  
2/9*

*57*

*Rept given Mrs Jacobs  
7-5-40*

3 DEC 31 1943

**Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.**

July 1, 1940

Medical Officer in Charge  
United States Public Health Service  
14th and Independence Avenue, Southwest  
Washington, D. C.

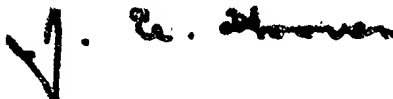
RE: Mr. Herman O. Bly  
230 Rhode Island Avenue, Northeast  
Washington, D. C.  
Special Agent

Dear Sir:

The bearer of this letter is a candidate for appointment to the service of the Federal Bureau of Investigation, United States Department of Justice.

In accordance with arrangements previously made, it is requested that a thorough physical examination be given to determine the fitness of this candidate for the position in question. The fingerprint of the right forefinger should be included, and also a notation as to the applicant's near vision.

Very truly yours,



John Edgar Hoover  
Director

## CERTIFICATE OF MEDICAL EXAMINATION

(Authorized by Executive Order of September 4, 1924)

APPLICANT MUST FILL IN DOTTED LINES BELOW TO HEAVY LINE

Herman C. Bly  
(Name)  
230 Rhode Island St NE #503  
(Post-office address)  
Male 9/12/13  
(Sex) (Date of birth)  
Special Investigation Agent  
(Title of examination taken)  
Bureau of Investigation  
(Department and bureau in which you are to be employed)  
(City or town in which you are to be employed)

ROLLED PRINT, right forefinger

(Print must be taken to identify person examined. Indelible or stamp pad should be used)



1. Have you any physical defect or disease or disability whatsoever? No  
2. If answer is "yes" give details

## PHYSICIAN SHOULD FILL IN THE FOLLOWING

69 1/2 inches. \* 142 pounds. 142 pounds. (Males, with and without clothing; females, clothed, but without wrap or hat.)  
(Height, without shoes) (Weight, in clothing) (Weight, without clothing)

\*To be taken for males only upon special written request of the official ordering examination.

Items checked (✓) were examined and found normal. Deviations from normal are noted. (See instructions on reverse side, numbered to correspond with items below.)

1. Eyes: Distant vision: Without glasses: Right: 20 Left: 20 With glasses if worn: Right: 20 Left: 20  
Near vision:

What is the longest and the shortest distance at which the following specimens of Jaeger No. 1 and Jaeger No. 2 can be read by the applicant? If No. 1 is read with ease, No. 2 need not be given. Test each eye separately.

With the view of promoting health and efficiency and of minimizing accidents among Federal employees, the heads of the several executive departments and independent establishments having a medical personnel are directed to make such physical examination of applicants for (Jaeger No. 1)

and employees in the Federal classified service as may be requested by the Civil Service Commission or its authorized representative.

This order will supplement the Executive orders of May 29 and June 12, 1923 (Executive order, September 4, 1924). (Jaeger No. 2)

Without glasses: With glasses, if used:  
R. 20 in. to 6 in. R. 20 in. to 6 in.  
L. 20 in. to 6 in. L. 20 in. to 6 in.

Without glasses: With glasses, if used:  
R. 20 in. to 6 in. R. 20 in. to 6 in.  
L. 20 in. to 6 in. L. 20 in. to 6 in.

Evidence of disease or injury: Right ✓ Left ✓  
Color vision ✓ Method of testing color vision check

2. Ears: (Consider denominators indicated here as normal. Record as numerators the actual distance heard.) Ordinary conversation: Right ear 20 ft. ✓ Left ear 20 ft. ✓  
Evidence of disease or injury: Right ear ✓ Left ear ✓

3. Nose, sinus disease, etc. ✓  
4. Mouth and throat ✓  
5. Gastro-intestinal ✓  
6. Thyroid (especially in woman) ✓  
7. Heart and blood vessels ✓

Is organic heart disease present? No If organic heart disease is present, is it fully compensated? ✓

8. Lungs: Right ✓ Left ✓  
History of tuberculosis? None If so, has the disease been arrested for at least 1 year? ✓

9. Hernia ✓  
(If present, name variety: Inguinal, ventral, femoral, etc.; read definition on reverse before answering)  
If present, is it supported by a well-fitting truss? ✓

10. Varicose veins ✓  
(If present, state location and degree)

- Varicocele (see note 10 on reverse side) ✓

11. Feet: Is flat foot present? No Degree of impairment of function ✓  
(None, slight, moderate, severe)

12. Deformities, atrophies, and other abnormalities, diseases, or defects not included above ✓

13. Scars of serious injury or disease ✓

14. Nervous system (see note 14 on reverse side) ✓

15. (a) Urinalysis (see reverse side) ✓ (b) Venereal disease None

16. Obtain from applicant statement of disabilities, past and present, give diagnosis and your comments under appropriate heading above or under "Remarks" on back of this sheet.

17. Does Veterans Administration recognize service-connected disability in this case? ✓ If "yes," cover in your comments. (Yes or no)

This certificate is to be returned to the official of the U. S. Civil Service Commission requesting the examination

The aim of the Executive order of September 4, 1924, under which this examination is made, is to obtain information as to the physical condition of appointees to the classified civil service with a view to promoting efficiency and minimizing accidents and claims under United States employees' compensation laws.

### Notes for Examining Physician

**Weight.**—Males, without clothing, and also in ordinary clothing without overcoat or hat (weigh twice); females, clothed, but without wrap or hat. If overweight, state whether due to bone and muscle or to fat.

**Height.**—Without boots or shoes; observe that no appliances are used to increase.

The examination should include the following observations:

1. **Eyes.**—Ptosis; discharge; corneal scar; pterygium. In recording distant vision consider 20 feet as normal and report all vision as a fraction with 20 feet as numerator and the smallest type read at 20 feet as denominator. If glasses are used, record for each eye the finding with and without glasses. Near vision must be reported. In testing vision without glasses the applicant or appointee should be instructed to remove the glasses at least one-half hour before testing uncorrected vision.

2. **Ears.**—Evidence of middle ear or mastoid disease; condition of drums; discharge. In recording hearing, record 20 feet as normal distance for conversational voice and record deviation from normal as fraction with 20 as denominator and actual distance as numerator.

3. **Nose.**—Ability to blow through each nostril. If free, a speculum examination would not be indicated.

4. **Mouth and throat.**—Missing teeth, pyorrhea; tonsils, hypertrophy or disease.

5. **Gastro-intestinal.**—Ulcers, inflammations, etc.

6. **Thyroid.**—Presence of tumor in neck and tremor, exophthalmos; nervous high-strung disposition, especially in women.

7. **Heart.**—Murmurs. State whether functional or organic. If valvular disease exists, state whether or not it is fully compensated. Arteriosclerosis.

8. **Lungs.**—It is necessary that the auscultatory cough be used. If tuberculosis is present, state whether active or arrested; if arrested, state your opinion as to how long it has been quiescent. Sputum to be examined for tubercle bacilli in all suspected cases.

9. **Hernia.**—Give details as to size, location, etc., and whether well-fitting truss is worn. Inguinal hernia exists when ring is enlarged and on coughing visceral impulse is felt which follows the finger on withdrawal.

10. **Varicocele.**—If varicocele is present, state approximate size—e. g., size of walnut, lemon, etc.

11. **Flat foot** of such a nature as to incapacitate or become aggravated by work or be alleged later to have been caused by accident or occupation. By "flat foot," as used in this form, is meant a weak foot with impaired function, the term being equivalent to "fallen or misplaced arch," an abnormal condition. Impairment of function is the point to be noted. An anatomically flat foot, but strong, is not disqualifying.

12 and 13. **Scars, deformities, atrophies, and paralyses** should be noted, but it is not important that small insignificant scars or blemishes which might be referred to as marks of identification be recorded.

14. This entry should include symptoms and full history of any mental or nervous abnormality.

15. **Urinalysis** to be made in case of persons over 40, and in all cases where arteriosclerosis, nephritis, or diabetes is suspected.

Record of urinalysis, if made: Sp. gr. \_\_\_\_\_ Albumen \_\_\_\_\_ Sugar \_\_\_\_\_ Casts \_\_\_\_\_  
Blood pressure: Mm. Hg. systolic 128 Mm. Hg. diastolic 74  
If tachycardia is present, give pulse rate: Sitting Good Immediately after exercise \_\_\_\_\_ Two minutes after exercise \_\_\_\_\_ Cardiac reserve Good  
(Good, fair, or poor)

I have found this applicant abnormal under the following headings: \_\_\_\_\_

In my opinion, applicant is capable of performing duties involving Arduous physical exertion.  
(Arduous, moderate, or light)

REMARKS: \_\_\_\_\_

(Signature of applicant) Herman O. Bly

(This space to be filled in, as a matter of identification, by the applicant in own hand writing, and in ink, in the presence of the physician)

7/2/40

(Place of examination)

The examining physician must be in Federal service

U. S. PUBLIC HEALTH SERVICE DISPENSARY

AUDITOR'S BLDG., 14TH ST. & INDEPENDENCE AVE., S. W.

WASHINGTON, D. C.

The personnel officer should fill in the blanks below before sending this form to the Commission for action

To be appointed in \_\_\_\_\_  
(Department) (Bureau)

Title of position \_\_\_\_\_

Type of appointment (check): ☐ Original appointment ☐ Transfer ☐ Reinstatement ☐ Classification

Number of certificate upon which applicant's name appears (to be given in case of original appointment) \_\_\_\_\_

# FEDERAL BUREAU OF INVESTIGATION

Form No. 1

THIS CASE ORIGINATED AT

WASHINGTON, D. C.

FILE NO.

67-14

REPORT MADE AT <b>Richmond, Virginia</b>	DATE WHEN MADE <b>7-11-40</b>	PERIOD FOR WHICH MADE <b>7/5,8/40</b>	REPORT MADE BY <b>JOHN C. NEWLY</b> <span style="float: right;"><b>LB</b></span>
TITLE <b>HERMAN OLIN ELY</b>			CHARACTER OF CASE <b>APPLICANT - SPECIAL AGENT</b>

**SYNOPSIS OF FACTS:**

Uncle of applicant, **W. W. KELLER**, employed in Roanoke, Virginia. **F. A. SHYROCK**, Winchester, Virginia, advised applicant member of his Sunday School Class, character and reputation good, presents average appearance and would not hesitate to employ applicant himself if he had a vacancy. Advises "applicant raised on a hickory rod and Bible."

- P -

**REFERENCE:**

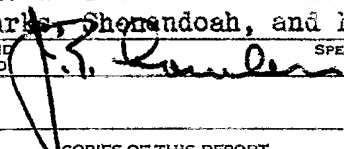
Telegram from the Bureau to the Richmond Office, dated July 2, 1940.

**DETAILS:**

**At WINCHESTER, VIRGINIA:**

Chief of Police **C. W. HOLLIS** advised that he was not acquainted with **WALTER W. KELLER**, uncle of the applicant. Chief **HOLLIS** also advised that **F. A. SHYROCK**, former Mayor of Winchester, was out of town and would not return until July 8, 1940.

The Richmond Office was telegraphically advised of this and was requested to make a check at Roanoke, Virginia relative to **WALTER W. KELLER**'s employment there. **Mrs. C. C. BLANNON**, Deputy Clerk, County Court at Winchester, Virginia, was not acquainted with **WALTER W. KELLER**, and it was necessary to contact applicant's mother at 352 Fairview Avenue relative to her brother's employment. She advised that he was a lawyer and checked titles for Federal Parks, Shenandoah, and had an office in Roanoke, Virginia.

APPROVED AND FORWARDED 	SPECIAL AGENT IN CHARGE	DO NOT WRITE IN THESE SPACES	
COPIES OF THIS REPORT 3 - Bureau 2 - Washington Field 2 - Richmond		26	



67-14

F. A. SHYROCK, Winchester, Virginia, advised that he had known applicant since he was a boy in his teens and that he was at one time a member of the Sunday School Class SHYROCK conducted. SHYROCK advised that applicant had a good character and reputation as far as he knew him, that he has never heard anything said against the applicant. SHYROCK further stated that applicant presented an average appearance and he would not hesitate to employ him if he were in business for himself, and applicant applied for a position to which he would be adaptable. SHYROCK advised that applicant is a typical small town boy who has been raised "on a hickory rod and the Bible" and has displayed "intestinal fortitude" by going to night school and working for everything he has obtained.

UNDEVELOPED LEADS

THE RICHMOND OFFICE

At ROANOKE, VIRGINIA:

At the Post Office Building will contact the proper officials of the Federal Parks Service, and verify applicant's uncle's employment as he is reported to be an attorney, makes abstracts and checks titles for the Federal Parks, Shenandoah and others in Virginia. Applicant's uncle's name is WALTER W. KELLER.

- PENDING -

# FEDERAL BUREAU OF INVESTIGATION

Form No. 1

THIS CASE ORIGINATED AT **WASHINGTON, D. C.**

FILE NO. **67-14**

REPORT MADE AT <b>RICHMOND, VIRGINIA</b>	DATE WHEN MADE <b>7-16-40</b>	PERIOD FOR WHICH MADE <b>7-15-40</b>	REPORT MADE BY <b>C. A. KAHRHOFF, JR. CAKjr:VL</b>
TITLE <b>HERMAN OLE: ELY</b>			CHARACTER OF CASE <b>APPLICANT - SPECIAL AGENT</b>

**SYNOPSIS OF FACTS:**

**WALTER W. KELLER**, uncle of applicant, employed May 20, 1935, to date as abstractor for U. S. Forest Service, Roanoke, Va.

- RUC -

**REFERENCE:**

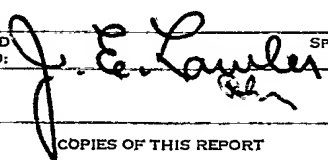
Report of Special Agent **JOHN C. NEELY**, Richmond, Virginia, dated 7-11-40.

**DETAILS:**

**At ROANOKE, VIRGINIA:**

Miss **HELEN LORTZEN**, general records and file clerk, U.S. Forest Service, Jefferson National Forest, United States Post Office Building, searched the records of the U. S. Forest Service and advised that **WALTER W. KELLER** was employed on May 20, 1935, as a temporary employee at \$2000.00 per annum. **KELLER**'s duties consisted of examining abstracts and checking titles for the U. S. Forest Service. On July 1, 1938, **KELLER** was appointed to the position of assistant abstractor CAF-5 in the U. S. Forest Service. On November 28, 1939, **KELLER** was raised in salary to \$2100.00 per annum. The file reflects that **KELLER** is at present employed in the U. S. Forest Service. However, in view of the fact there is no appropriation for the purchase of land in the Jefferson National Forest after January 1, 1941, Mr. **KELLER**'s employment will cease at that time for there will be no need for his services after that date.

REFERRED UPON COMPLETION TO THE OFFICE OF ORIGIN

APPROVED AND FORWARDED: 	SPECIAL AGENT IN CHARGE	DO NOT WRITE IN THESE SPACES <div style="text-align: center; font-size: 2em;">27</div>
COPIES OF THIS REPORT  13 - Bureau 2 - Washington Field 2 - Richmond		

# FEDERAL BUREAU OF INVESTIGATION

Form No. 1  
THIS CASE ORIGINATED AT

WASHINGTON, D. C.

FILE NO. 67-7592

REPORT MADE AT <b>WASHINGTON, D. C.</b>	DATE WHEN MADE <b>7/19/40</b>	PERIOD FOR WHICH MADE <b>7/3,8,9/40</b>	REPORT MADE BY <b>C. W. NAUL, Jr. CWT:JDIF</b>
TITLE <b>HERMAN OLIN BLY</b>			CHARACTER OF CASE <b>APPLICANT - SPECIAL AGENT</b>

**SYNOPSIS OF FACTS:**

Neighborhood and reference investigation reflects applicant is industrious, honest, sincere, ambitious and possesses good character and good reputation. Applicant entered National Law School, September 23, 1935; graduated June 9, 1938 with LL.P. Degree and maintained little better than average grades throughout. Applicant admitted D.C. Bar Association June 1, 1940 and D. C. Bar April 19, 1939 and is in good standing. Applicant's indebtedness to GMAC, La Salle Extension, Sears and Roebuck, and Clean-Rite Vacuum Cleaner Company, all in good standing. Good credit records, Washington, D.C. JOHN LEAHY, in charge floor sales, Washington Gas Light Company, applicant's immediate superior, recommends applicant highly.

- C -

**REFERENCE:**

Bureau letter to the Washington Field Division dated July 1, 1940 (Bureau file 67-99243). Report of Special Agent W. M. MORRIS, Washington, D. C., dated May 15, 1937.

**DETAILS:**

AT WASHINGTON, D. C.

NEIGHBORHOOD

Investigation in vicinity of applicant's residence at 230 Rhode Island Avenue, N.E., revealed that Mrs. G. A. MACRAE

APPROVED AND FORWARDED 	SPECIAL AGENT	DO NOT WRITE IN THESE SPACES
COPIES OF THIS REPORT  3-Bureau 2-Washington Field		28

was manager of the Rhode Island Garden Apartments and she upon interview advised applicant has occupied apartment 503 for a period of approximately two years and that he was a quiet, unassuming, conservative individual. She further advised that applicant pays his rent promptly and regularly and that she has never received any complaints as to his conduct. Mrs. MACRAE requested that no further investigation be conducted in the apartment inasmuch as tenants might possibly gossip. In view of the fact that entrance to the apartment was secured only through her permission no further investigation was conducted at that address.

In the vicinity of 945 Longfellow Street, N.W., the following individuals were contacted: Mrs. R. N. MORRIS, apartment 1, advised that she remembered applicant and his wife residing in apartment 5 across the hall from her apartment and although she did not know them intimately she did know that they were well thought of in the apartment. She further advised that she had never heard anything detrimental about applicant and the mode of living was very conservative.

Mrs. R. W. GLAVES, apartment 4, upon interview, advised that she remembered applicant and his wife residing in apartment 5, which is next to her apartment, for a period of about one year; that applicant tenanted this apartment approximately three or four years ago, as close as she could remember; that their mode of living was conservative; that he was hard working; and a family man, being very devoted to his wife; that their hours were regular and that they had never had occasion to complain about them; that she never heard anything detrimental about applicant.

Inasmuch as reference report of Special Agent W. M. MORRIS, Washington, D. C., dated May 15, 1937 reflects that a neighborhood investigation was conducted at 4105 - 3rd Street, N.W., no further investigation was conducted at this time at that address.

#### REFERENCES

Reference GODFREY L. MUNTER, attorney, room 844, 1331 G Street, N.W., upon interview advised that he came in contact with applicant three or four years ago while he was teaching at the National Law School and while applicant was a student; that he remembers applicant as a reliable, level-

headed, conscientious fellow, very competent and well qualified to handle anything of a confidential nature. MUNTER further advised that he had come in contact with applicant socially through their membership in the Sigma Nu Phi Legal Fraternity and that applicant at all times conducted himself appropriately; that applicant did not drink and was very conservative; that applicant was not forward, and that he was definite in his ideas and ideals.

Reference WILLIAM E. STANSBURY, employed by the Globe Ind. Insurance Company, 3285 Worthington Street, Washington, D.C., upon interview advised that he met applicant during the year 1935 when both were law students at the National Law School and that they graduated together in 1938. STANSBURY advised that applicant was industrious, honest, sincere, ambitious and possessed good character and reputation; that his morals were beyond reproach and would recommend him highly for any position; that he has never heard anything detrimental about applicant.

#### CREDIT AND POLICE RECORDS

Miss RUTH NEAL, clerk at Stone's Mercantile Agency, Inc., 1419 H Street, N.W., upon contact made her records available upon applicant and these records reflect in a report dated 1937 that applicant was born July 12, 1913 and is employed by the Washington Gas Light Company, 411 - 10th Street, N.W., from approximately August 5, 1935 to the present date, as an assistant clerical supervisor in the Sales Department. His salary was not known but his services are recorded as satisfactory; that applicant's wife prior to her marriage in August, 1937 was one Miss MARTHA WRIGHT. The records further revealed that there was nothing detrimental as to applicant and that he possessed a good credit rating.

Miss MARCELLA LIBONATI, clerk, Associated Retail Credit Men of Washington, D.C., 1221 G Street, N.W., upon contact made her records available and these records reflect that applicant lived at 230 Rhode Island Avenue, N.E., apartment 503, paying \$52.50 per month rent and that his payments were satisfactory; that applicant came from 352 Fairview Avenue, Winchester, Virginia, where his mother, Mrs. VERNIE N. BLY lived; that applicant's wife, MARTHA WRIGHT, came from Mansfield, Ohio, and was a graduate nurse at Episcopal, Eye Ear and Throat Hospital, 1147 - 15th Street, N.W., Washington, D.C.

The records further reflect similar information contained in the above mentioned files of the Stone's Mercantile Agency, Incorporated.

Mr. AMERCSE DURKIN of the Records Bureau, Metropolitan Police Department, advised that his files do not reflect a police record on applicant.

#### LEGAL RECORD

Miss K. REID, clerk, Registrar's Office, National Law School, 818 - 13th Street, N.W., in absence of Mrs. A. K. COMEP, Registrar, advised that her records reflect applicant entered the school September 23, 1935 and graduated June 9, 1938 with an LL.B. Degree; that applicant maintained a little above average grades throughout his attendance and had no failures and no conditions during that time; that there were never any complaints or anything detrimental about applicant's record; that in all probability there would be no instructors available who would remember applicant.

Records of the Clerk of the District Court, Washington, D.C., reflect that applicant was admitted to the District of Columbia Bar, April 19, 1939.

Miss F. P. MacDONALD, executive assistant of the Bar Association, 1331 G Street, N.W., advised that applicant was admitted to the D. C. Bar Association June 1, 1940 under an associate membership. She advised that non-practicing attorneys are allowed only an associate membership, since applicant was not practicing he came under that class; that six months dues are payable in advance amounting to \$6 and that applicant has paid same.

Judge R. GIVEN, in charge of the Committee on Admissions and Grievances, District Court of the United States for the District of Columbia, upon contact, made his records available on applicant and they reflect the following information: That applicant attended JOHN KERR School, first to fourth grades; Winchester, Virginia, 1920-1924; attended JOHN HANDLIFY High School, graduating 1932; and took post-graduate at the same school, 1933. The file further reflects a recommendation on applicant by Judge P. W. WILLIAMS, Circuit Court and Corporation Court, Winchester, Virginia, certifying as to applicant's good character.

The file further reflects that applicant studied law four years, one year by correspondence at Winchester, Virginia, and three years National Law School; that applicant gave the following individuals as references and the file reflects that these references replied to questionnaires submitted to them in a favorable manner:

W. HERBERT GILL, 1519 - 20th Street, N.W.,  
Washington, D.C.

EMIL SHYROCK, Greystone Terrace, Winchester,  
Virginia

Mayor C. R. ANDERSON, 309 West Clifford Street,  
Winchester, Virginia

JOHN H. ROSENBERGER, 124 West Boscawen Street,  
Winchester, Virginia

J. D. DINGWELL, 5305 Kirkside Drive,  
Chevy Chase, Maryland

#### INDEBTEDNESS

RICHARD HARMAN, attorney, Evans Building, Washington, D.C., upon interview, advised that he represents the La Salle Extension University, Chicago, Illinois, and that he could find no record of applicant's indebtedness to that institution. From this fact he advised that applicant had made settlement of any indebtedness that existed. He further advised that he would only have record of this indebtedness if it were still in existence or if suit had been filed and inasmuch as he had no record whatsoever this debt had been paid.

Miss M. De HARTE, clerk, General Motors Acceptance Corporation, Transportation Building, Washington, D. C., advised that on February 22, 1940 applicant entered into account number 70946 in the amount of \$244.68 in which applicant was to make 12 monthly payments in the amount of \$20.39; that applicant has paid his monthly instalments promptly and that the present balance was \$183.51.

Miss N. PERUZZI, credit receptionist, Sears and Roebuck Company, 911 Bladensburg Road, N.E., advised that on

January 26, 1940 applicant became indebted to that company in the amount of \$42.75 and that at the present time the balance on this account is \$17.75; that applicant pays his instalments promptly and is considered a good risk.

Miss R. RUBIN, bookkeeper, Clean-Rite Vacuum Cleaner Company, 925 F Street, N.W., upon interview advised that on May 29, 1940 applicant became indebted to that company in the amount of \$27.95 making a deposit of \$5 and the contract calling for paying the balance in three payments, the first of which would be on July 8, 1940; that applicant was considered a good risk and it was believed that he would pay promptly.

#### EMPLOYMENT

In the absence of J. D. DINGWELL, Jr., Personnel Manager, Washington Gas Light Company, 1100 - 29th Street, N.W., Miss E. CAMPBELL, office manager, personnel department, was contacted and she advised that her records on applicant reflect that applicant was employed by that company on August 5, 1935 as a stenographer in the Promotional Sales Division at a salary of \$85 a month; that in November, 1937 he became an assistant clerical supervisor with the same company and that on February 1, 1939 he was made a floor salesman at \$100 a month and commission and is so presently employed. She further advised that his immediate superior was JOHN LEAHY, in charge of the floor sales, and that the department superior was A. J. MALONEY. Miss CAMPBELL further advised that she being in the personnel department had reason to contact applicant and that she considered him an outstanding employee in that department.

Investigation at the Washington Gas Light Company, 411 - 10th Street, N.W., disclosed that A. J. MALONEY, department supervisor, was on vacation and accordingly JOHN LEAHY, applicant's immediate superior was contacted. He advised that applicant formerly worked as a stenographer and assistant clerical supervisor and he became interested in applicant and made arrangements for his transfer to his department as a floor salesman believing that applicant would be a sparkplug in his organization and that in the year and four months that he has worked for him applicant has proved to be the inspiration that put his department on its toes. He advised that applicant was ambitious, industrious, conducted himself in a very appropriate manner at all times, handled the public discreetly and tactfully, and did a very



satisfactory job. He advised that he knew nothing detrimental about applicant, had been in his company socially and to his knowledge never drank and had high morals and high ideals. LEAHY advised that the only criticism he could make about applicant was the fact that he could not interest applicant in joining civic organizations but that he associated this attitude to his youthfulness; that in all probability as he grew older he would take said interest.

- C L O S E D -

Federal Bureau of Investigation  
United States Department of Justice

Washington, D. C. July 26, 1940  
BRIEF OF SUPPLEMENTAL INVESTIGATION

ABP  
67-99243

RE: HERMAN OLIN BLY  
Special Agent Applicant

Written Rating: 70%  
Oral " : 83%  
Composite " : 76½%

Age 27  
Married

LLB-National Law University  
Member of D.C.Bar

Applicant was interviewed in May 1937 for the position of Typist-Messenger at which time Special Agent J. B. Shiley recommended applicant favorably. Agent Shiley advised that applicant thinks just a bit too much of himself. A character and fitness investigation was conducted in applicant's case at which time the following unfavorable information was disclosed: At LaSalle Extension University applicant received a grade of D (failure) in Negligence. Applicant was still indebted \$83 to LaSalle University and no payment had been made since July 1935. Applicant's physical report showed that the examining physician recommended applicant for moderate physical exertion. The following is a summary of the supplemental investigation conducted:

EDUCATION

National Law University, D.C., 1935-1938, LLB Degree

Records reflect applicant graduated maintaining a little above average grades.

Member of D.C.Bar  
Member of District Bar Association

Admitted April 19, 1939.  
Admitted June 1, 1940 under an associate membership.

EXPERIENCE

Washington Gas Light Co., D.C., Stenog., and Sales Contact Man, Since August 1935.

Miss Campbell, Office Manager, stated she considered applicant an outstanding employee in his department. Mr. Leahy, applicant's immediate

superior, stated applicant was ambitious, industrious, handled the public discreetly and tactfully, and did a very satisfactory job. Mr. Leahy advised the only criticism he could make about applicant is the fact that he could not interest applicant in joining civic organizations but that he associated this attitude to his youthfulness; that in all probability as he grew older he would take said interest.

REFERENCES

Godfrey L. Munter, Attorney,  
William E. Stansbury, Globe Ind. Ins. Co.  
both D.C.  
F.A. Shyrock, Winchester, Va.

References speak favorably of applicant. Mr. Munter advised he came in contact with applicant 3 or 4 years ago (applicant states 5 years). He advised applicant was definite in his ideas and ideals.

Mr. Shyrock stated applicant presented an average appearance; that applicant is a typical small town boy who has been raised "on a hickory rod and the Bible" and has displayed "intestinal fortitude" by going to night school and working for everything he has obtained.

.....Mr. Alley  
.....Mrs. Atkinson  
.....Miss Guigon  
.....Mrs. Jacobs  
.....Mrs. Wackerman  
.....  
.....  
.....

(action desired)

*offer applicant  
Aug 12 school  
8/29/40*

RECORDED  
Routed.....  
Searched.....  
Serialized.....  
Checked.....  
Filed.....

67-99243-29  
(file number)  
JUL 30 A.M.  
(date stamp)  
CHIEF CLERK  
(routing stamp)

RELATIVES IN GOVERNMENT SERVICE

Walter W. Keller, (Uncle), Attorney, checking titles and making abstracts, Federal Parks, Roanoke, Va. Employed since May 1935 as Assistant Abstractor at a salary of \$2100 per annum in the U.S. Forest Service

MISCELLANEOUS

Neighborhood investigation Favorable. Mrs. Macrae, Manager of the apartment where applicant resides, advised applicant was a quiet, unassuming, conservative individual.

Indebtedness: LaSalle Extension Univ., Chicago, Ill., \$83.00 (see former brief dated June 1937)

Mr. Harman, Attorney, advised he represents the LaSalle Extension University, and that he could find no record of applicant's indebtedness to that institution. From this fact he advised applicant had

made settlement of any indebtedness that existed. He advised he would only have record of this indebtedness if it were still in existence or if suit had been filed and inasmuch as he has no record whatsoever this debt had been paid.

G.M.A.C., D.C., \$183.51.

Satisfactory.

Sears & Roebuck, D.C., \$20.00

Satisfactory. Amount owed is \$17.75.

Clean Rite Vacuum Cleaner, Co. D.C. \$20.00

Satisfactory.

Personal interview with Interviewing Official W. R. Glavin

Reports applicant has an excellent personal appearance and approach; is neat in dress; has refined features; has a good personality; is well-poised;

average in speech and tact; self-confident; answers general questions definitely; has studied Federal Procedure at National University; appears to be resourceful and to have executive ability; and is likely to develop; however, he has had no investigative experience. Mr. Glavin states applicant gave a very favorable impression. He is a very clean-cut young fellow and shows his sales training. He has an excellent personality and personal appearance. It is Mr. Glavin's opinion that applicant will become a better than average Agent in a short period of time. Recommendation: Favorable. Applicant is acquainted with Dorothy Swartz, wife of SA C.R. Davidson.

OUTSTANDING ENDORSERS

None.

Applicant's physical report shows his eyes as normal without glasses; and he is recommended for arduous physical exertion.

*W. R. Glavin*  
W. R. Glavin

FEDERAL BUREAU OF INVESTIGATION

Mr. **Mr. Herman C. Ely**  
Miss  
Mrs.

Date **July 30, 1940**

New appointment ☒ Transfer ☐ Promotion ☐ Separation ☐

PRESENT STATUS

1. Title:
2. Grade:
3. Salary:
4. Seat of Government: ☐  
Field: ☐
5. Division:
6. Appropriation:

PROPOSED ACTION

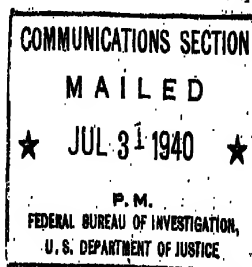
7. Title: **Special Agent**
8. Grade: **CAF 9**
9. Salary: **\$3200 per annum and \$5.00 per diem**
10. Seat of Government: ☐  
Field: ☐
11. Division:
12. Appropriation: **"Salaries and Expenses, FBI"**
13. Effective: **With entry on duty**
14. Position: Vice: ☐  
Identical: ☒
15. Remarks:

**Recommended for appointment as a Special Agent in grade CAF 9, with salary at the rate of \$3200 per annum and \$5.00 per diem in lieu of subsistence and expenses of travel and operation when absent from official headquarters.**

CC: Chief, Audit Section

Respectfully submitted,

Director, Federal Bureau of Investigation



AUG 3 1940

12 46 PM '40  
U. S. DEPT. OF JUSTICE  
RECEIVED

2

I, ..... *Herman O. Bly* ..... do solemnly  
swear that I will support and defend the Constitution of the United  
States against all enemies, foreign and domestic; that I will bear  
true faith and allegiance to the same; that I take this obligation  
freely, without any mental reservation or purpose of evasion; and  
that I will well and faithfully discharge the duties of the office  
of .... Special Agent in the Federal Bureau of Investigation, .....  
..... United States Department of Justice .....  
on which I am about to enter: So help me God.

(Sign here) ..... *Herman O. Bly* .....

Subscribed and sworn to before me this  
... *12* ... day of *August* ..... 19*40* .....

..... *Wm. C. Jackson* .....  
Notary Public.

DATE OF ENTRY ON DUTY ..... *8/12/40* .....

DATE OF BIRTH ..... *7/12/13* .....

PLACE OF BIRTH\* ..... *Naucluse, Virginia* .....

\* If foreign born, date of naturalization .....

LEGAL VOTING RESIDENCE ..... *Winchester, Virginia* .....

DO YOU RECEIVE AN ANNUITY UNDER THE CIVIL SERVICE RETIREMENT ACT

..... *NO* .....  
(Yes or no)

*W*  
*413-46*  
*10/10/40*

*Heenan C. Bluff*

RECORDED

~~SEP 18 1940~~

67-99273-34	
FEDERAL	INVESTIGATION
SEP 16 1940	
Routed	_____
Searched	_____
Numbered	_____
CHF. CLK.	<i>[Signature]</i>
GOVERNOR	<i>[Signature]</i>



52

DEC 31 1953

*[Handwritten mark]*

LABORATORY EXAMINATION

DATE

8-19-40

U. S. NAVAL HOSPITAL

U. S. GOVERNMENT PRINTING OFFICE 4-3370

Name

Bly, Herman O.

Ward

Rate

Diagnosis

SPECIMEN SUBMITTED (underline):

Urine—Blood—Gastric contents—

Feces—Sputum—Pus—Special

Exact information desired

R&M

N  
S

Nothing

Dr. Price

(M. C.), U. S. N.

(Separate slip for each specimen)

Amount, 24 hrs.

Submitted

Appearance

Reaction

Sp. gr.

1.022

Albumin

Sugar

Special

casts

Indroids

Mucus

Leucocytes

Erythrocytes

Epithelium

Crystals

(M. C.), U. S. N.

(Special forms may be stamped on front and back)

LABORATORY EXAMINATION

DATE

8-19-40

U. S. NAVAL HOSPITAL

U. S. GOVERNMENT PRINTING OFFICE 4-3370

Name

Bly, Herman O.

Ward

Rate

Diagnosis

SPECIMEN SUBMITTED (underline):

Urine—Blood—Gastric contents—

Feces—Sputum—Pus—Special

Exact information desired

CPK  
N

Dr. Price

(M. C.), U. S. N.

(Separate slip for each specimen)

RBC 4,700,000

WBC 11,000

Hgb 95%

SED 78

Lymph 20

Mon 2%

(M. C.), U. S. N.

(Special forms may be stamped on front and back)

N. M. S. Hospital Form No. 27  
(Issue 1938)

LABORATORY EXAMINATION

DATE

8-19-40.

U. S. NAVAL HOSPITAL

U. S. GOVERNMENT PRINTING OFFICE 4-587

Name

Bly, Herman O.

Ward

Rate

Diagnosis

SPECIMEN SUBMITTED (underline):

Urine—Blood—Gastric contents—

Feces—Sputum—Pus—Special

Exact information desired

Kahn Test - neg

Blood type "O"

Kahn

S. Price (M. C.), U. S. N.

(Separate slip for each specimen)

(M. C.), U. S. N.

(Special forms may be stamped on front and back)



RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS OF THE  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

Post Dick Quarter - Quantico Va.  
Place

August 17, 1940

HISTORY

Name Herman O. Bly Age 27 years, 1 months  
Nativity (state) Virginia Married, Single, Widowed: Married Number of Children None

Diseases, operations, or injuries previous to age of 15 (Give date and full description of each and examine carefully for evidence of sequelae.)

No operations

Measles, mumps - nothing serious

Diseases, operations, or injuries subsequent to age 15 (Give date and full description of each and examine carefully for evidence of sequelae.)

Tonsils removed - July 1939

No other operations

Strep throat - Feb 1938

or serious illness

Father . . . . . (Living? Dead State of Health Central Hemorrhage  
(Dead? Dead Cause & age at death? 51)

Mother . . . . . (Living? Living State of Health Good  
(Dead? Dead Cause & age at death? Good)

Brothers . . . . . (Number living 4 State of Health Good  
(Number dead None Cause & age at death? Good)

Sisters . . . . . (Number living None State of Health Good  
(Number dead One Cause & age at death? Died at Birth)

Has any member of family suffered from neurasthenia or insanity or been confined in any institution for the insane? Give relationship and full history of case.

No

Has any blood relative been an inmate of a penal institution or poorhouse? Give relationship and state reasons.

No

Habits: Tobacco? No Alcoholic? Moderate Drugs? No  
(occasionally socially)

Herman O. Bly  
Signature of Candidate.

FBI

ENTERED ON CARD

# PHYSICAL EXAMINATION

Eyes: Color? Blue Exophthalmos? no

Chronic inflammation? no Other abnormality? none

Eyelids: Ptosis? no Condition of conjunctiva on eversion? normal

Other eye conditions? none

Vision: (Note: Each eye must be tested separately.)

Does candidate wear glasses? No For what purpose? —

Distant: Uncorrected vision of right eye? 20/20 Left eye? 20/20

Corrected vision of right eye? — Left eye? —

Near: Uncorrected vision of right eye? JT - 13" Left eye? JT - 13"

Corrected vision of right eye? — Left eye? —

Remarks: normal vision

Color sense: Good - Stilling  
(Standard color plate test required)

Ears: Abnormalities? NO Evidence of mastoid or other disease: none

Condition of drums? Right normal Left normal

Hearing: (Note: When testing hearing, the eyes and the opposite ear must be closed.)

Distance conversational speech can be heard:

Right ear 30 feet. Left ear 30 feet.

Distance whispered speech (Using residual air) can be heard:

Right ear 30 feet. Left ear 30 feet.

(Note: Use tuning fork tests, Rinne, Weber & Schwabach, if indicated.)

Right ear — Left ear —

Nose: Deflection of septum no Polypi? no

Chronic nasal disease? no Is candidate a mouth breather? no

Palate: Cleft or perforated? no Other conditions? none

Fauces: Condition of tonsils? Removed Pharynx? normal

SV

*Carroll*

Signature of Examining Specialist.

Height? 5 feet, 10 1/2 inches. Weight, stripped? 142 1/2 Pounds.

General appearance: (Robust? ☒ ) (White? ☒ )  
(Puny? ) (Colored? )  
(Plethoric? ) (Blonde? ☒ )  
Complexion: (Anaemic? ) (Brunette? )  
(Corpulent? ) (Florid? )  
(Emaciated? ) (Sallow? )

Skin: Diseases? ☒  
Hair: Color: lt. br Thickness fine  
Glands: Enlargement: ☒ Other abnormalities ☒  
Head, Depressions? ☒ Asymmetries? ☒  
Facial disfigurement? ☒ Facial asymmetry? ☒  
Abnormalities of speech? ☒  
Neck: Goitre? ☒ Other conditions? ☒

Chest: Inspiration 35 inches. Expiration 32 inches. Respiratory rate? 16  
Inspection: ☒  
Lungs: Palpation: ☒  
Percussion: ☒  
Auscultation: ☒  
X-ray examination: ☒  
Heart: Palpation: ☒  
Percussion: ☒  
Auscultation: ☒

Exercise Test: Step upon chair 25 times in 30 seconds. Pulse rate should return to normal after two minutes.

Pulse rate: Sitting 82 After exercise 82  
Condition of heart after exercise: ☒  
Blood pressure, Systolic? 120 Distolic? 70 Pulse pressure 50

Abdomen:

Circumference at umbilicus? \_\_\_\_\_ Tenderness? \_\_\_\_\_  
Other abnormalities? \_\_\_\_\_  
Liver, percussion? \_\_\_\_\_ Palpation? \_\_\_\_\_  
Spleen, percussion? \_\_\_\_\_ Palpation? \_\_\_\_\_  
Inguinal rings? \_\_\_\_\_ Hernia? \_\_\_\_\_

Scrotum:

Varicocele? \_\_\_\_\_ Hydrocele? \_\_\_\_\_ Sarcocoele \_\_\_\_\_

Testicles:

Induration? \_\_\_\_\_ Atrophy? \_\_\_\_\_  
Other conditions? \_\_\_\_\_

Penis:

Epispadias? \_\_\_\_\_ Hypospadias? \_\_\_\_\_  
Condition of prepuce? \_\_\_\_\_ Venereal diseases? \_\_\_\_\_

Anus:

Hemorrhoids? \_\_\_\_\_ Fistulae? \_\_\_\_\_  
Prolapse of bowel? \_\_\_\_\_ Other conditions \_\_\_\_\_

Spine:

Tenderness? \_\_\_\_\_ Curvature? \_\_\_\_\_

Reflexes:

Pupillary: \_\_\_\_\_ Cremasteric: \_\_\_\_\_  
Patellar: \_\_\_\_\_ Babinski: \_\_\_\_\_ Ankleclonus: \_\_\_\_\_

Upper Extremity:

Missing fingers? \_\_\_\_\_ Contractures of hand? \_\_\_\_\_  
Condition of joints? \_\_\_\_\_ Other conditions? \_\_\_\_\_

Lower Extremity:

5 2 Flat foot? \_\_\_\_\_ Bowed legs? \_\_\_\_\_  
Knock-knees? \_\_\_\_\_ Varicose Veins? \_\_\_\_\_

Hammer toes? ✓ Bunions? ✓

Other abnormalities? ✓

Agility:

Co-ordination of muscular movements? ✓ Romberg? ✓

Defects of gait? ✓

Mental Condition? ✓

(Note: If indicated refer to specialist)

Temperature? 99.6

Has this person been successfully vaccinated within 5 years? no

Has this person had prophylactic typhoid inoculation? no Date last taken         

Urine: Color?          Sp. Gr.?          Albumin?          Sugar?         

Reaction?          Shreds?          Blood cells?         

Pus cells?          Casts?          Epithelial cells?         

Blood: Red corpuscles per C.mm          White corpuscles per C.mm         

Differential count         

Blood serologic tests (syphilis):          Haemoglobin per cent:         

Has candidate any of the following defects, viz: Cachexia, or apparent predisposition to any constitutional diseases, permanent defects of either of the extremities or articulations, including defects of gait, flat foot, badly bowed legs, knock-knees, unnatural curvature of the spine, impaired vision, color-blindness, chronic diseases of the visual organs, epilepsy, insanity, chronic diseases of the ears, deafness, chronic nasal disease, polypi, chronic ulcers or cicatrices of old ulcers likely to break out afresh, chronic cardiac pulmonary or renal affections, insufficient chest expansion, hernia, sarcocele, hydrocele, varicocele (unless slight), fistula in ano, hemorrhoids, varicose veins on lower limbs (unless slight) stature less than 5 feet 4 inches, or more than 6 feet 2 inches, or any marked abnormality of speech or facial disfigurement?

Report of any special examination:

56

# DENTAL EXAMINATION OF \_\_\_\_\_

## GENERAL ORAL CONDITION

### MUCOUS MEMBRANE

<input checked="" type="checkbox"/>	Normal
<input type="checkbox"/>	Inflamed
<input type="checkbox"/>	Swollen
<input type="checkbox"/>	Ulcerated
<input type="checkbox"/>	Septic

### SALIVA

<input checked="" type="checkbox"/>	Normal
<input type="checkbox"/>	Excessive
<input type="checkbox"/>	Acidity
<input type="checkbox"/>	Thick or ropy
<input type="checkbox"/>	Odor

### OCCLUSION

<input checked="" type="checkbox"/>	Normal
<input type="checkbox"/>	Class I
<input type="checkbox"/>	Class II
<input type="checkbox"/>	Class III

### TONGUE

<input type="checkbox"/>	Coating
<input type="checkbox"/>	Cryptic
<input type="checkbox"/>	Ulcerated
<input type="checkbox"/>	Enlarged

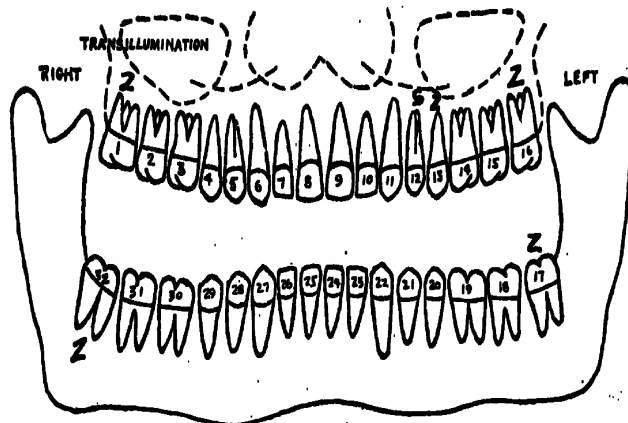
Glands no  
 Sinus -  
 Throat -

### ARCH

<input type="checkbox"/>	Square
<input type="checkbox"/>	Tapering
<input checked="" type="checkbox"/>	Ovoid

## DENTAL DIAGNOSIS

- A. Labial
- B. Lingual
- C. Incisal
- D. Occlusal
- E. Buccal
- G. Mesial
- H. Distal
- K. Mesio-labial
- L. Distal-labial
- M. Mesio-lingual
- N. Distal-lingual
- O. Mesio-incisal
- P. Distal-incisal
- R. Mesio-occlusal
- S. Distal-occlusal
- T. Bucco-occlusal
- U. Lingual-occlusal
- V. Mesio-distal-occlusal
- W. Bucco-lingual-occlusal



☒ Roots   ☐ Abscess   ☐ Impacted   ☐ Crown   ☐ Devitalized   ☐ Dummy bridge   ☐ On denture   ☐ Missing   ☐ Extraction indicated

X-ray No. \_\_\_\_\_ X-ray reading \_\_\_\_\_

Gingival disease (indicate nature and extent) no

Conditions of appliances replacing teeth no

Remarks: \_\_\_\_\_

In case a dentist is not available to make the dental examination, the medical examiner shall record missing teeth, prosthetic replacements, and give a general estimate of oral condition.

Date 8-19-40 (Signature) William J. Chan

Dental Surgeon

Summary of Findings

(Summarize here all defects found.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Recommendations:

1. Is this man capable of strenuous ✓ moderate \_\_\_\_\_ light \_\_\_\_\_  
or very light \_\_\_\_\_ physical exertion. (Indicate which).
2. Has this man any defect which would interfere with his participation  
in raids or other work connected with the detection and apprehension  
of criminals which might entail the practical use of firearms?  
(Indicate YES or NO) no

Remarks:

J. L. Schweg  
J. W. Case  
B. W. Price

Administrative action by Federal Bureau of Investigation.

52

DIRECTOR

N. D. B. J.

PHYSICAL EXAM.

5-102944  
RECEIVED

67- 99243-54	
Routed. <i>h</i>	Recorded
AUG 28 1941	

THREE  
*mg*

35 DEC 31 1963





NAME *Bly, H.O.*

N.M.S. Form 16.

STATUS *H.O.L.*

## LABORATORY EXAMINATION

U.S. NAVAL MEDICAL SCHOOL

Naval Medical Center

Washington, D.C.

DATE

*8/13/41, Inservice } H.O.L. 210*

## REPORT

Request of

*Dr. Feen*

Address

*H.O.L. Room*

Request for Blood KAHN and Blood

WASSERMANN TESTS.

KAHN

WASSERMANN

Qualitative

Quantitative

Cholesterolized

Units

Antigen

NEGATIVE

"BLOOD TYPE" *O*

Lieut. Comdr. (MC), U.S.N.

(MC), U.S.N.

NAME *ELY, H.O.*

N.M.S. Form 6

RATE *FBI*

U. S. NAVAL MEDICAL SCHOOL

Naval Medical Center

Washington, D.C.

DATE 13 August, 1941

## LABORATORY EXAMINATION

Request of

*Dr. Feen*

Address:

*FBI Room*

Diagnosis

*Physical Examination*

Character of examination desired

## URINALYSIS

Amount: 24 hrs. Submitted

Color *Straw* Transparency *Clear*Reaction *Acid* Sp. Gr. *1.010*Albumin *Negative*Sugar *Negative*Occult blood *Negative* Special

Casts

Cylindroids Mucus *Occasional thread*

Leucocytes

Erythrocytes

Epithelium *Rare squamous*

Crystals

Lieut. Comdr. (MC), U.S.N.

RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS OF THE  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

Washington, D.C.  
Place

August 13, 1941

HISTORY

Name HERMAN OLIN BLY Age 28 years, 1 months  
Nativity (state) Virginia Married, Single, Widowed: Married Number of Children None

Diseases, operations, or injuries previous to age of 15 (Give date and full description of each and examine carefully for evidence of sequelae.)

Only mild childhood diseases; Nothing serious

Diseases, operations, or injuries subsequent to age 15 (Give date and full description of each and examine carefully for evidence of sequelae.)

"Strep" Throat - February 1938

Tonsil operation - July 1938

(Living? \_\_\_\_\_ State of Health \_\_\_\_\_  
Father . . . . . (Dead? Dead Cause & age at death? Cerebral Hemorrhage  
(Living? Living State of Health Good  
Mother . . . . . (Dead? \_\_\_\_\_ Cause & age at death? \_\_\_\_\_  
(Number living 3 State of Health Good  
Brothers . . . . . (Number dead None Cause & age at death? \_\_\_\_\_  
(Number living None State of Health \_\_\_\_\_  
Sisters . . . . . (Number dead One Cause & age at death? Childbirth - 3d

Has any member of family suffered from neurasthenia or insanity or been confined in any institution for the insane? Give relationship and full history of case.

No

Has any blood relative been an inmate of a penal institution or poorhouse? Give relationship and state reasons.

No

Habits: Tobacco? No Alcoholic? Very Infrequently Drugs? No

H. O. Bly  
Signature of Candidate.

PHYSICAL EXAMINATION

Eyes: Color? Blue Exophthalmos? W

Chronic inflammation? W Other abnormality? -

Eyelids: Ptosis? W Condition of conjunctiva on eversion? 0.15

Other eye conditions? -

Vision: (Note: Each eye must be tested separately.)

Does candidate wear glasses? W For what purpose? -

Distant: Uncorrected vision of right eye? 20/20 Left eye? 20/20

Corrected vision of right eye? - Left eye? -

Near: Uncorrected vision of right eye? 20 Left eye? 20

Corrected vision of right eye? - Left eye? -

Remarks: -

Color sense: normal

(Standard color plate test required)

Ears: Abnormalities? W Evidence of mastoid or other disease: W

Condition of drums? Right 0.15 Left 0.15

Hearing: (Note: When testing hearing, the eyes and the opposite ear must be closed.)

Distance conversational speech can be heard:

Right ear - feet. Left ear - feet.

Distance whispered speech (Using residual air) can be heard:

Right ear 15/15 feet. Left ear 15/15 feet.

(Note: Use tuning fork tests, Rinne, Weber & Schwabach, if indicated.)

Right ear - Left ear -

Nose: Deflection of septum W Polypi? W

Chronic nasal disease? W Is candidate a mouth breather? W

Palate: Cleft or perforated? W Other conditions? -

Fauces: Condition of tonsils? ant Pharynx? 0.15

46

D. J. Ryan

Signature of Examining Specialist.

Height? 5 feet, 10 inches. Weight, stripped? 141 Pounds.

(Robust? <u>✓</u>	(White? <u>✓</u>
(Puny? _____	(Colored? _____
(Plethoric? _____	(Blonde? <u>✓</u>
General appearance: ( _____	Complexion: ( _____
(Anaemic? _____	(Brunette? _____
(Corpulent? _____	(Florid? _____
(Emaciated? _____	(Sallow? _____

Skin: Diseases? N

Hair: Color: Brown Thickness thick

Glands: Enlargement: N Other abnormalities N

Head, Depressions? N Asymmetries? N

Facial disfigurement? N Facial asymmetry? N

Abnormalities of speech? N

Neck: Goitre? N Other conditions? N

Chest: Inspiration 37 inches. Expiration 33 1/2 inches. Respiratory rate? \_\_\_\_\_

Inspection: N

Lungs: Palpation: N

Percussion: N

Auscultation: N

X-ray examination: N

Heart: Palpation: N

Percussion: N

Auscultation: N

Exercise Test: Step upon chair 25 times in 30 seconds. Pulse rate should return to normal after two minutes.

48 Pulse rate: Sitting 82 After exercise 124  
2 min. 90 3 min. 82

Condition of heart after exercise: N

Blood pressure, Systolic? 118 Diastolic? 76 Pulse pressure 42

Abdomen:

Circumference at umbilicus? 30 Tenderness? n.  
Other abnormalities? n.  
Liver, percussion? n. Palpation? n.  
Spleen, percussion? n. Palpation? n.  
Inguinal rings? n. Hernia? n.

Scrotum:

Varicocele? n. Hydrocele? n. Sarcocoele n.

Testicles:

Induration? n. Atrophy? n.  
Other conditions? n.

Penis:

Epispadias? n. Hypospadias? n.  
Condition of prepuce? n. Venereal diseases? n.

Anus:

Hemorrhoids? n. Fistulae? n.  
Prolapse of bowel? n. Other conditions n.

Spine:

Tenderness? n. Curvature? n.

Reflexes:

Pupillary: n. Cremasteric: n.  
Patellar: n. Babinski: n. Ankleclonus: n.

Upper Extremity:

Missing fingers? n. Contractures of hand? n.  
Condition of joints? n. Other conditions? n.

Lower Extremity:

4 Flat foot? n. Bowed legs? n.  
Knock-knees? n. Varicose Veins? n.

Hammer toes? M. Bunions? M.

Other abnormalities? M.

Agility:

Co-ordination of muscular movements? M. Romberg? M.

Defects of gait? M.

Mental Condition? M.

(Note: If indicated refer to specialist)

Temperature? 98.6

Has this person been successfully vaccinated within 5 years? M.

Has this person had prophylactic typhoid inoculation? M. Date last taken

Urine: Color?  Sp. Gr.?  Albumin?  Sugar?

*see report attached* Reaction?  Shreds?  Blood cells?

Pus cells?  Casts?  Epitheal cells?

Blood: Red corpuscles per C.mm  White corpuscles per C.mm

Differential count

Blood serologic tests (syphilis): Negative Haemoglobin per cent:

Has candidate any of the following defects, viz: Cachexia, or apparent predisposition to any constitutional diseases, permanent defects of either of the extremities or articulations, including defects of gait, flat foot, badly bowed legs, knock-knees, unnatural curvature of the spine, impaired vision, color-blindness, chronic diseases of the visual organs, epilepsy, insanity, chronic diseases of the ears, deafness, chronic nasal disease, polypi, chronic ulcers or cicatrices of old ulcers likely to break out afresh, chronic cardiac pulmonary or renal affections, insufficient chest expansion, hernia, sarcocoele, hydrocele, varicocele (unless slight), fistula in ano, hemorrhoids, varicose veins on lower limbs (unless slight) stature less than 5 feet 4 inches, or more than 6 feet 2 inches, or any marked abnormality of speech or facial disfigurement?

Report of any special examination:

48

# DENTAL EXAMINATION OF \_\_\_\_\_

## GENERAL ORAL CONDITION

### MUCOUS MEMBRANE

<input checked="" type="checkbox"/> Normal
<input type="checkbox"/> Inflamed
<input type="checkbox"/> Swollen
<input type="checkbox"/> Ulcerated
<input type="checkbox"/> Septic

### SALIVA

<input checked="" type="checkbox"/> Normal
<input type="checkbox"/> Excessive
<input type="checkbox"/> Acidity
<input type="checkbox"/> Thick or ropy
<input type="checkbox"/> Odor

### OCCLUSION

<input checked="" type="checkbox"/> Normal
<input type="checkbox"/> Class I
<input type="checkbox"/> Class II
<input type="checkbox"/> Class III

### TONGUE

<input checked="" type="checkbox"/> Normal
<input type="checkbox"/> Coating
<input type="checkbox"/> Cryptic
<input type="checkbox"/> Ulcerated
<input type="checkbox"/> Enlarged

Glands \_\_\_\_\_

Sinus \_\_\_\_\_

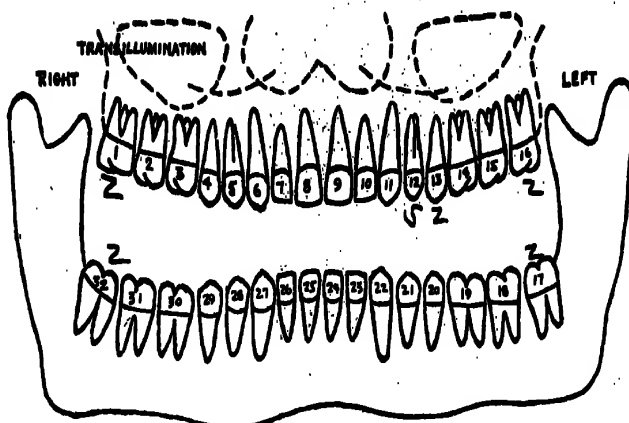
Throat \_\_\_\_\_

### ARCH

<input type="checkbox"/> Square
<input checked="" type="checkbox"/> Tapering
<input type="checkbox"/> Ovoid

## DENTAL DIAGNOSIS

- A. Labial
- B. Lingual
- C. Incisal
- D. Occlusal
- E. Buccal
- G. Medial
- H. Distal
- K. Mesio-labial
- L. Distal-labial
- M. Mesio-lingual
- N. Distal-lingual
- O. Mesio-incisal
- P. Distal-incisal
- R. Mesio-occlusal
- S. Distal-occlusal
- T. Bucco-occlusal
- U. Lingual-occlusal
- V. Mesio-distal-occlusal
- W. Bucco-lingual-occlusal



☒ Root   
 ☐ Abscess   
 ☐ Impacted   
 ☐ Crown   
 ☐ Deviated   
 ☐ Dummy bridge   
 ☐ On denture   
 ☐ Missing   
 ☐ Extrusion indicated

X-ray No. \_\_\_\_\_ X-ray reading \_\_\_\_\_

Gingival disease (indicate nature and extent) \_\_\_\_\_

Conditions of appliances replacing teeth \_\_\_\_\_

Remarks: \_\_\_\_\_

In case a dentist is not available to make the dental examination, the medical examiner shall record missing teeth, prosthetic replacements, and give a general estimate of oral condition.

48  
 Date \_\_\_\_\_ (Signature) Carl O. Bellard  
 Dental Surgeon

### Summary of Findings

(Summarize here all defects found.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Recommendations: *Small Pox and Typhoid Prophylaxis*

*SA  
Lyon*

1. Is this man capable of strenuous ☒ moderate \_\_\_\_\_ light \_\_\_\_\_  
or very light \_\_\_\_\_ physical exertion. (Indicate which).
2. Has this man any defect which would interfere with his participation  
in raids or other work connected with the detection and apprehension  
of criminals which might entail the practical use of firearms?  
(Indicate YES or NO)           *no*

Remarks:

\_\_\_\_\_  
*Carl A. Schacht*  
*Ronald M. Grant*

Administrative action by Federal Bureau of Investigation.

\_\_\_\_\_  
DIRECTOR

*48*



FEDERAL BUREAU OF INVESTIGATION

Prepared by: *[Signature]*  
 Checked by: *[Signature]*  
 Filed by: *[Signature]*

Mr. *YK*  
 Miss  
 Mrs.

Mr. Herman O. Ely

Date April 15, 1944

New appointment ☐ Transfer ☐ Promotion ☒ Separation ☐

PRESENT STATUS

- |                             |   |
|-----------------------------|---|
| 1. Title: Special Agent     | 2. Grade: CAF 11  |
| 3. Salary: \$3800 per annum | 4. Seat of Government: <input type="checkbox"/><br>Field: <input checked="" type="checkbox"/> |
| 5. Division:                | 6. Appropriation: "Salaries and Expenses, FBI"<br>(National Defense)                          |

PROPOSED ACTION

- |                               |  |
|-------------------------------|--|
| 7. Title: Special Agent       | 8. Grade: CAF 12   |
| 9. Salary: \$4600 per annum   | 10. Seat of Government: <input type="checkbox"/><br>Field: <input checked="" type="checkbox"/>   |
| 11. Division:                 | 12. Appropriation: "Salaries and Expenses, FBI"<br>(National Defense)  |
| 13. Effective: April 16, 1944 | 14. Position: Vice: <input checked="" type="checkbox"/><br>Additional: <input type="checkbox"/><br>Identical: <input type="checkbox"/> |
| 15. Remarks:                  |  |

Respectfully submitted,

CC: Chief, Audit Section  
 CCO: Selective Service

Director, Federal Bureau of Investigation

Tolson  
 E. A. Tamm  
 Clegg  
 Coffey  
 Glavin  
 Ladd  
 Nichols  
 Rosen  
 Tracy  
 Acers  
 Carson  
 Harbo  
 Hendon  
 Mumford  
 Stark  
 Quinn  
 Nease  
 Gandy

COMMUNICATIONS SECTION  
 MAILED 14  
 APR 15 1944 P.M.  
 FEDERAL BUREAU OF INVESTIGATION  
 U. S. DEPARTMENT OF JUSTICE

42

67-107-10000  
 APR 15 1944  
*[Signature]*

## FEDERAL BUREAU OF INVESTIGATION

Mr.  
Miss  
Mrs.

Date

Mr. Herman O. Sly

April 14, 1942

New appointment ☐Transfer ☐Promotion ☒Separation ☐

## PRESENT STATUS

1. Title: Special Agent

2. Grade: CAF 10

3. Salary: \$3500 per annum

4. Seat of Government: ☐  
Field: ☐

5. Division:

6. Appropriation: "Salaries and Expenses, FBI"  
(National Defense)

## PROPOSED ACTION

7. Title: Special Agent

8. Grade: CAF 11

9. Salary: \$3500 per annum

10. Seat of Government: ☐  
Field: ☐

11. Division:

12. Appropriation: "Salaries and Expenses, FBI"  
(National Defense)

13. Effective: April 16, 1942.

14. Position: Vice: ☐  
Additional: ☐  
Identical: ☐  
Vice: Wilfred R. Lorry, transferred  
4-16-42.

15. Remarks:

Respectfully submitted,

CC: Chief, Audit Section

Mr. Tolson

Mr. E. A. Tamm

Mr. Clegg

Mr. Glavin

Mr. Ladd

Mr. Nichols

Mr. Tracy

Mr. Egan

Mr. Gurnea

Mr. Coffey

Mr. Hendon

Mr. Holloman

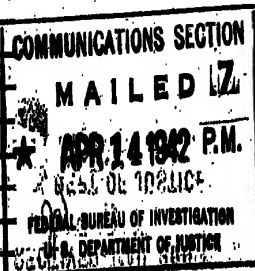
Mr. McGuire

Mr. Quinn Tamm

Mr. Nease

Miss Gandy

Director, Federal Bureau of Investigation



87-507-277-114  
JAN 1 1942  
JAN 1 1942

APR 14 1942  
U.S. DEPARTMENT OF JUSTICE

49

# ANNUAL REPORT OF EFFICIENCY RATING

ADMINISTRATIVE-UNOFFICIAL ( )  
OFFICIAL: REGULAR ( ☒ ) SPECIAL ( )  
PROBATIONAL or TRIAL PERIOD ( )

As of March 31, 1944 based on performance during period from April 1, 1943 to March 31, 1944

HERMAN OLIN BLY

Special Agent

CAF-11 380

(Name of employee)

-----  
(Title of position, service, and grade)

Federal Bureau of Investigation

New York Field Division

(Organization—Indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A.	CHECK ONE:
✓ if adequate	2. Underline the elements which are especially important in the position.	Administrative, supervisory, or planning----- <input type="checkbox"/>
- if weak	3. Rate only on elements pertinent to the position.	All others----- <input checked="" type="checkbox"/>
+ if outstanding	<div>a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions.</div> <div>b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i>.</div>	

- \_\_\_\_\_ (1) Maintenance of equipment, tools, instruments.  
 \_\_\_\_\_ (2) Mechanical skill.  
+ \_\_\_\_\_ (3) Skill in the application of techniques and procedures.  
 \_\_\_\_\_ (4) Presentability of work (appropriateness of arrangement and appearance of work).  
+ \_\_\_\_\_ (5) Attention to broad phases of assignments.  
+ \_\_\_\_\_ (6) Attention to pertinent detail.  
 \_\_\_\_\_ (7) Accuracy of operations.  
+ \_\_\_\_\_ (8) Accuracy of final results.  
+ \_\_\_\_\_ (9) Accuracy of judgments or decisions.  
+ \_\_\_\_\_ (10) Effectiveness in presenting ideas or facts.  
+ \_\_\_\_\_ (11) Industry.  
+ \_\_\_\_\_ (12) Rate of progress on or completion of assignments.  
+ \_\_\_\_\_ (13) Amount of acceptable work produced. (Is mark based on production records? Yes (Yes or no))  
+ \_\_\_\_\_ (14) Ability to organize his work.  
+ \_\_\_\_\_ (15) Effectiveness in meeting and dealing with others.  
+ \_\_\_\_\_ (16) Cooperativeness.  
+ \_\_\_\_\_ (17) Initiative.  
+ \_\_\_\_\_ (18) Resourcefulness.  
+ \_\_\_\_\_ (19) Dependability.  
+ \_\_\_\_\_ (20) Physical fitness for the work.
- \_\_\_\_\_ (21) Effectiveness in planning broad programs.  
 \_\_\_\_\_ (22) Effectiveness in adapting the work program to broader or related programs.  
 \_\_\_\_\_ (23) Effectiveness in devising procedures.  
 \_\_\_\_\_ (24) Effectiveness in laying out work and establishing standards of performance for subordinates.  
 \_\_\_\_\_ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.  
 \_\_\_\_\_ (26) Effectiveness in instructing, training, and developing subordinates in the work.  
 \_\_\_\_\_ (27) Effectiveness in promoting high working morale.  
 \_\_\_\_\_ (28) Effectiveness in determining space, personnel, and equipment needs.  
 \_\_\_\_\_ (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.  
 \_\_\_\_\_ (30) Ability to make decisions.  
 \_\_\_\_\_ (31) Effectiveness in delegating clearly defined authority to act.
- STATE ANY OTHER ELEMENTS CONSIDERED  
+ (A) Ability to direct and lead raids and dangerous assignments.  
 \_\_\_\_\_ (B) \_\_\_\_\_  
 \_\_\_\_\_ (C) \_\_\_\_\_

**STATE ANY OTHER ELEMENTS CONSIDERED**

+ (A) Ability to direct and lead raids and dangerous assignments.

----- (B) -----  
----- (C) -----

## STANDARD

Deviations must be explained on reverse side of this form

Plus marks on all underlined elements, and no minus marks.....

Plus marks on at least half of the underlined elements, and no minus marks.....

Check marks or better on a majority of underlined elements, and any minus marks overcompensated by plus marks.....

Check marks or better on a majority of underlined elements, and minus marks not overcompensated by plus marks.....

Minus marks on at least half of the underlined elements.....

Adjective rating

Excellent \_\_\_\_\_

Very good \_\_\_\_\_

Good \_\_\_\_\_

Fair \_\_\_\_\_

Unsatisfactory \_\_\_\_\_

Rating official \_\_\_\_\_

Reviewing official \_\_\_\_\_

14

Rated by E. E. CONROY (Signature of rating official) Special Agent in Charge (Title) March 31, 1944 (Date)  
Reviewed by W. V. Glavin (Signature of reviewing official) Assistant Director (Title) Federal Bureau of Investigation (Title) 4-5-44 mhl (Date)

Rating approved by efficiency rating committee \_\_\_\_\_ Report to employee \_\_\_\_\_  
(Date) (Adjective rating)

EOD

8-12-40

HERMAN OLIN BLY, SPECIAL AGENT - CAF 11  
ANNUAL EFFICIENCY REPORT AS OF MARCH 31, 1944

Special Agent Herman Olin Bly entered on duty with the Bureau on August 12, 1940 and has been assigned to the New York Office since October 3, 1941. He is presently in grade CAF-11 earning an annual salary of \$3800.

This Agent presents a very neat personal appearance, has a rather pleasant personality and is somewhat reserved. His work has shown he possesses a good amount of initiative and resourcefulness and when the occasion has arisen he has exhibited the proper amount of force and aggressiveness. His work has also reflected that he has good judgment and the ability to make decisions for himself. During the past year Special Agent Bly has been engaged in investigations relating to general Communist Party activities and has also investigated a Mail Fraud case in which the Russian Government was called upon to furnish a witness for the Government. During the greater part of the past year this Agent has been engaged on a special assignment relating to an espionage case and has conducted himself in a highly satisfactory manner. He has participated on numerous physical surveillances and has also been utilized on numerous Confidential surveillances above and beyond the line of duty and which have resulted in the obtaining of information inaccessible to ordinary confidential informants.

Agent Bly uses the touch system on the typewriter at a speed of approximately 30 words per minute and takes shorthand at approximately 50 words per minute. He testified in a moot court proceeding held in the New York Office on October 28, 1943 at which time he received a rating of good. He also testified before a U. S. Grand Jury and in a Federal Court at which time he made a creditable witness.

This Agent has obtained his New York State driver's license and is considered to be a very good automobile driver. He is a qualified Bureau speaker and has displayed some supervisory ability.

In connection with the aforementioned special assignment on which this Agent has been engaged there are approximately 20 Agents assigned to this one case and Agent Bly has handled the obvious detailed office work that such a large investigation involves, when the Agent to whom the case is assigned was not available.

This Agent has shown better than average ability in organizing and initiating investigations that have been assigned to him and he readily accepts responsibility for his own activities and decisions in connection with his work. He is rated by the stenographers in the New York Office as an excellent dictator. His reports are clear, concise and well written. He has produced more than an average amount of work.

This Agent has made some very good contacts with Police Officials in this territory and has had no difficulty in contacting business concerns.

Agent Bly is qualified in the use of all the Bureau weapons. His ability to handle the various Bureau firearms is above average. He has shown a steady improvement in this respect during the past year. He is attentive, alert, observes all safety precautions and is capable of handling dangerous assignments.

This Agent is extremely conscientious towards the Bureau's work, is loyal and willingly devotes as much time as is necessary to carry out his assignments in a logical manner. I feel he is entitled to a rating of excellent within his present grade status.

WFO:36

September 13, 1944

PERSONAL AND ~~CONFIDENTIAL~~

Mr. Herman O. Ely  
Federal Bureau of Investigation  
224 U. S. Court House Building  
Foley Square  
New York 7, New York

Dear Mr. Ely:

The Bureau is in receipt of the report of the physical examination afforded you at the United States Naval Hospital, Quantico, Virginia, on September 1, 1944.

This report reflects the following physical defects:

None.

The Board of Examining Physicians makes the following recommendations:

Inoculation for tetanus.

It reports that you are capable of performing strenuous physical exertion, and have no physical defects that would interfere with your participation in raids or other work involving the practical use of firearms.

Sincerely yours,

J. E. Hoover

John Edgar Hoover  
Director

cc: New York

RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

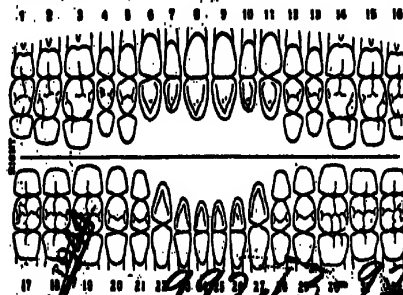
CC-270

NAME Bly, Herman Olin AGE 31 YEARS, 1 MONTHS  
NATIVITY (state of birth) Va. MARRIED, SINGLE, WIDOWED: married NUMBER OF CHILDREN 0  
FAMILY HISTORY Father deceased, cerebral hemorrhage  
Mother in good health  
1 child died 36 hours after birth.  
HISTORY OF ILLNESS OR INJURY  
Strip throat 1938  
Tonsils removed 1938  
HEAD AND FACE  
EYES: PUPILS (size, shape, reaction to light and distance, etc.) normal react to l & r  
DISTANT VISION RT. 20/ 20, corrected to 20/  
LT. 20/ 20, corrected to 20/  
COLOR PERCEPTION normal  
(state edition of Stilling's plates or Lamps used)  
DISEASE OR ANATOMICAL DEFECTS none  
EARS: HEARING RT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH 15/  
LT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH 15/  
DISEASE OR DEFECTS none  
NOSE none  
(Disease or anatomical defect, obstruction, etc. State degree)  
SINUSES normal  
TONGUE, PALATE, PHARYNX, LARYNX, TONSILS normal

TEETH AND GUMS (disease or anatomical defect): normal

MISSING TEETH 1-13-16-17-32  
NONVITAL TEETH none  
PERIAPICAL DISEASE no  
MARKED MALOCCLUSION no  
PYORRHEA ALVEOLARIS no  
TEETH REPLACED BY BRIDGES none

DENTURES no  
REMARKS



Walker G. Browne  
(Signature of Dental Officer)

GENERAL BUILD AND APPEARANCE medium  
TEMPERATURE 98 CHEST AT EXPIRATION 36  
HEIGHT 69 1/2 CHEST AT INSPIRATION 38 1/2  
WEIGHT 149 CIRCUMFERENCE OF ABDOMEN AT UMBILICUS 30  
RECENT GAIN OR LOSS, AMOUNT AND CAUSE none  
SKIN, HAIR, AND GLANDS n  
NECK (abnormalities, thyroid gland, trachea, larynx) n  
SPINE AND EXTREMITIES (bones, joints, muscles, feet) n

*Det. Olin*  
*9-13-44*

*43*

THORAX (size, shape, movement, rib cage, mediastinum) n  
RESPIRATORY SYSTEM, BRONCHI, LUNGS, PLEURA, ETC. n

CARDIO-VASCULAR SYSTEM n  
HEART (note all signs of cardiac involvement)

PULSE: BEFORE EXERCISE 86 BLOOD PRESSURE: SYSTOLIC 112  
AFTER EXERCISE 112 DIASTOLIC 74  
THREE MINUTES AFTER 76  
CONDITION OF ARTERIES n CHARACTER OF PULSE n  
CONDITION OF VEINS n HEMORRHOIDS n

ABDOMEN AND PELVIS (condition of wall, scars, herniae, abnormality of viscera) n

GENITO-URINARY SYSTEM n  
URINALYSIS: SP. GR. 1.032 ALB. n SUGAR n MICROSCOPICAL   
VENEREAL DISEASE n

NERVOUS SYSTEM n  
(organic or functional disorders)  
ROMBERG n INCOORDINATION (gait, speech) n  
REFLEXES, SUPERFICIAL n DEEP (knee, ankle, elbow) n TREMORS n  
SEROLOGICAL TESTS Kahn test negative BLOOD TYPE   
ABNORMAL PSYCHE (neurasthenia, psychasthenia, depression, instability, worries)

SMALLPOX VACCINATION: DATE OF LAST VACCINATION 1943  
TYPHOID PROPHYLAXIS: NUMBER OF COURSES 1  
DATE OF LAST COURSE 1943  
REMARKS ON ABNORMALITIES NOT OTHERWISE NOTED OR SUFFICIENTLY DESCRIBED ABOVE

SUMMARY OF DEFECTS none

CAPABLE OF PERFORMING DUTIES INVOLVING any PHYSICAL EXERTION  
IS THIS INDIVIDUAL PHYSICALLY FIT TO PARTICIPATE IN RAIDS AND APPREHENSION OF CRIMINALS  
WHICH MIGHT ENTAIL THE PRACTICAL USE OF FIREARMS yes (yes or no)  
(when no is given state cause)

FINDINGS, RECOMMENDATIONS AND REMARKS (as per boards, when necessary)

John B. Nuckolls

DATE OF EXAMINATION

9-1-44



August 2, 1946

PERSONAL AND ~~CONFIDENTIAL~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

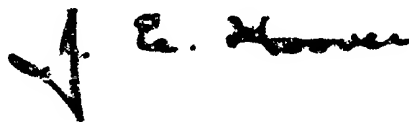
Dear Mr. Bly:

The Bureau is in receipt of the report of the physical examination afforded you at the United States Naval Hospital, Bethesda, Maryland, on June 21, 1946.

This report reflects that you have no physical defects.

The Board of Examining Physicians of the United States Naval Hospital reports that you are capable of performing strenuous physical exertion and have no physical defects that would interfere with your participation in raids or other work involving the practical use of firearms.

Sincerely yours,



John Edgar Hoover  
Director

CC: Mr. Ladd

Mr. Tolson \_\_\_\_\_  
Mr. E. A. Tamm \_\_\_\_\_  
Mr. Clegg \_\_\_\_\_  
Mr. Glavin \_\_\_\_\_  
Mr. Ladd \_\_\_\_\_  
Mr. Nichols \_\_\_\_\_  
Mr. Rosen \_\_\_\_\_  
Mr. Tracy \_\_\_\_\_  
Mr. Carson \_\_\_\_\_  
Mr. Egan \_\_\_\_\_  
Mr. Gurnea \_\_\_\_\_  
Mr. Harbo \_\_\_\_\_  
Mr. Pennington \_\_\_\_\_  
Mr. Quinn Tamm \_\_\_\_\_  
Mr. Nease \_\_\_\_\_  
Miss Gandy \_\_\_\_\_

NPC:lih

67-101 RECORDED

RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

NAME Herman O. Sly AGE 32 YEARS, 11 MONTHS  
NATIVITY (state of birth) Va. MARRIED, SINGLE, WIDOWED: n NUMBER OF CHILDREN 0  
FAMILY HISTORY n

HISTORY OF ILLNESS OR INJURY nothing serious

HEAD AND FACE n

EYES: PUPILS (size, shape, reaction to light and distance, etc.) n

DISTANT VISION RT. 20/ 20, corrected to 20/

LT. 20/ 20, corrected to 20/

COLOR PERCEPTION n

(state edition of Stilling's plates or Lamps used)

DISEASE OR ANATOMICAL DEFECTS n

EARS: HEARING RT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH /15'

LT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH /15'

DISEASE OR DEFECTS n

NOSE n

(Disease or anatomical defect, obstruction, etc. State degree)

SINUSES n

TONGUE, PALATE, PHARYNX, LARYNX, TONSILS n

TEETH AND GUMS (disease or anatomical defect): n

MISSING TEETH 1, 13, 16, 17, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

NONVITAL TEETH n

PERIAPICAL DISEASE n

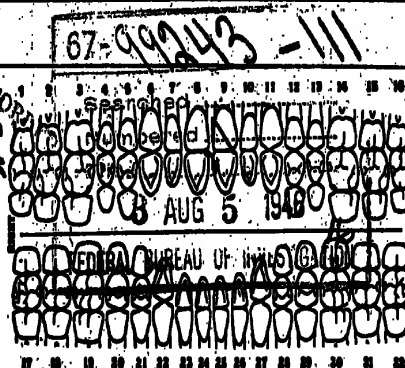
MARKED MALOCCLUSION n

PYORRHEA ALVEOLARIS n

TEETH REPLACED BY BRIDGES n

DENTURES n

REMARKS n



E. F. Morton

(Signature of Dental Officer)

GENERAL BUILD AND APPEARANCE robust

TEMPERATURE 99

CHEST AT EXPIRATION 34

HEIGHT 70 1/2

CHEST AT INSPIRATION 37 1/2

WEIGHT 149

CIRCUMFERENCE OF ABDOMEN AT UMBILICUS 31

RECENT GAIN OR LOSS, AMOUNT AND CAUSE n

SKIN, HAIR, AND GLANDS n

NECK (abnormalities, thyroid gland, trachea, larynx) n

JOINTS AND EXTREMITIES (bones, joints, muscles, feet) n

THORAX (size, shape, movement, rib cage, mediastinum) n  
 RESPIRATORY SYSTEM, BRONCHI, LUNGS, PLEURA, ETC. n  
 CARDIO-VASCULAR SYSTEM n  
 HEART (note all signs of cardiac involvement) n  
 PULSE: BEFORE EXERCISE 84 BLOOD PRESSURE: SYSTOLIC 124  
 AFTER EXERCISE 120 DIASTOLIC 80  
 THREE MINUTES AFTER 92  
 CONDITION OF ARTERIES n CHARACTER OF PULSE SB  
 CONDITION OF VEINS n HEMORRHOIDS n  
 ABDOMEN AND PELVIS (condition of wall, scars, herniae, abnormality of viscera) n  
 GENITO-URINARY SYSTEM n  
 URINALYSIS: SP. GR. 1.015 ALB. n SUGAR n MICROSCOPICAL n  
 VENEREAL DISEASE n  
 NERVOUS SYSTEM n  
 (organic or functional disorders)  
 ROMBERG n INCOORDINATION (gait, speech) n  
 REFLEXES, SUPERFICIAL n DEEP (knee, ankle, elbow) n TREMORS n  
 SEROLOGICAL TESTS n BLOOD TYPE O  
 ABNORMAL PSYCHE (neurasthenia, psychasthenia, depression, instability, worries) tetanus no  
n  
typhus no  
 SMALLPOX VACCINATION: DATE OF LAST VACCINATION child hood 1943  
 TYPHOID PROPHYLAXIS: NUMBER OF COURSES 1943  
 DATE OF LAST COURSE \_\_\_\_\_  
 REMARKS ON ABNORMALITIES NOT OTHERWISE NOTED OR SUFFICIENTLY DESCRIBED ABOVE \_\_\_\_\_  
 SUMMARY OF DEFECTS \_\_\_\_\_  
 CAPABLE OF PERFORMING DUTIES INVOLVING full PHYSICAL EXERTION  
 IS THIS INDIVIDUAL PHYSICALLY FIT TO PARTICIPATE IN RAIDS AND APPREHENSION OF CRIMINALS  
 WHICH MIGHT ENTAIL THE PRACTICAL USE OF FIREARMS yes (yes or no).  
 (when no is given state cause) \_\_\_\_\_  
 FINDINGS, RECOMMENDATIONS AND REMARKS (as per boards, when necessary) \_\_\_\_\_  
Fit for full duty  
Robert T. Miller  
 DATE OF EXAMINATION 6-21-46

# FEDERAL BUREAU OF INVESTIGATION

Prepared by *dek*  
Checked by: *pe*  
Filed by:

Mr.  
Miss  
Mrs.

Date

New appointment ☒ *Mr. Hily*

Transfer ☐

Promotion ☐

Detachment ☐

## PRESENT STATUS

1. Title:

2. Grade:

3. Salary:

*Special Agent*

4. Seat of Government:

Field: *CAP 12*

5. Division: *\$5100 per annum*

6. Appropriation:

## PROPOSED ACTION

7. Title:

8. Grade:

9. Salary:

*Special Agent*

10. Seat of Government:

Field: *CAP 12*

11. Division: *\$5390 per annum*

12. Appropriation:

13. Effective:

15. Remarks: *October 22, 1945*

14. Position:

*Additional Salary and Expenses, FBI\*  
(National Defense)*

*Mr. Hily is being promoted under the Automatic Promotion Bill, Public Laws #200 and #106.  
He was reallocated from CAP 11, \$3800 to CAP 12, \$4800 effective April 16, 1944.*

CC-600, Selective Service

Director, Federal Bureau of Investigation

### COMMUNICATIONS SECTION

MAILED 9

★ OCT 4 - 1945 P.M.

FEDERAL BUREAU OF INVESTIGATION  
U. S. DEPARTMENT OF JUSTICE

Mr. Tolson  
Mr. E. A. Tamm  
Mr. Clegg  
Mr. Coffey  
Mr. Glavin  
Mr. Ladd  
Mr. Nichols  
Mr. Rosen  
Mr. Tracy  
Mr. Carson  
Mr. Egan  
Mr. Gurnea  
Mr. Hendon  
Mr. Pennington  
Mr. Quinn Tamm  
Mr. Nease  
Miss Gandy

1945 REL

42

0  
HERMAN O. BLY

This employee presents a mature appearance, possesses a pleasant personality and dresses neatly. He is possessed of initiative, is resourceful and aggressive. He organizes his work very well and is a proficient dictator. This employee is energetic, ambitious, and thoroughly interested in his work. He uses good judgment and his work has been thorough and accurate. He is attentive to his duties, amenable to discipline and his production is far above average. He is loyal, dependable and in my opinion possesses possibilities for further advancement.

1406.

6 MAY 6  
RECEIVED

77242-116

12  
MAY 8 1941

RELATION

ANNUAL  
REPORT OF  
EFFICIENCY RATING

ADMINISTRATIVE—UNOFFICIAL ( )  
OFFICIAL: REGULAR (✓) SPECIAL ( )  
PROBATIONAL ( )

As of March 31, 1947 based on performance during period from Apr. 1, 1946 to March 31, 1947

Herman O. Bly  
(Name of employee)

Special Agent - CAF-12  
(Title of position, service, and grade)

Federal Bureau of Investigation, Security Division, Internal Security Section  
(Organization—Indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position. a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning <input checked="" type="checkbox"/> All others <input type="checkbox"/>
---------------------------------	---	---

- \_\_\_\_ (1) Maintenance of equipment, tools, instruments.  
\_\_\_\_ (2) Mechanical skill.  
± (3) Skill in the application of techniques and procedures.  
\_\_\_\_ (4) Presentability of work (appropriateness of arrangement and appearance of work).  
± (5) Attention to broad phases of assignments.  
± (6) Attention to pertinent detail.  
\_\_\_\_ (7) Accuracy of operations.  
± (8) Accuracy of final results.  
± (9) Accuracy of judgments or decisions.  
± (10) Effectiveness in presenting ideas or facts.  
± (11) Industry.  
± (12) Rate of progress on or completion of assignments.  
± (13) Amount of acceptable work produced. (Is mark based on production records? \_\_\_\_\_) (Yes or no)  
± (14) Ability to organize his work.  
± (15) Effectiveness in meeting and dealing with others.  
± (16) Cooperativeness.  
± (17) Initiative.  
± (18) Resourcefulness.  
± (19) Dependability.  
± (20) Physical fitness for the work.

- \_\_\_\_ (21) Effectiveness in planning broad programs.  
\_\_\_\_ (22) Effectiveness in adapting the work program to broader or related programs.  
\_\_\_\_ (23) Effectiveness in devising procedures.  
\_\_\_\_ (24) Effectiveness in laying out work and establishing standards of performance for subordinates.  
\_\_\_\_ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.  
\_\_\_\_ (26) Effectiveness in instructing, training, and developing subordinates in the work.  
\_\_\_\_ (27) Effectiveness in promoting high working morale.  
\_\_\_\_ (28) Effectiveness in determining space, personnel, and equipment needs.  
\_\_\_\_ (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.  
\_\_\_\_ (30) Ability to make decisions.  
\_\_\_\_ (31) Effectiveness in delegating clearly defined authority to act.

STATE ANY OTHER ELEMENTS CONSIDERED

- ± (A) Capability for Additional Responsibilities  
\_\_\_\_ (B) \_\_\_\_\_  
\_\_\_\_ (C) \_\_\_\_\_

STANDARD		Adjective Rating
Deviations must be explained on reverse side of this form		
Plus marks on all underlined elements, and check marks or better on all other elements rated.	✓ Excellent	Rating official: <u>Excellent</u> H.O.B.
Check marks or better on all elements rated, and plus marks on at least half of the underlined elements.	Very Good	Reviewing official: <u>[Signature]</u> J.E.B./dov
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance.	Good	
Check marks or better on a majority of underlined elements, and all weak performance not overcompensated by outstanding performance.	Fair	
Minus marks on at least half of the underlined elements.	Unsatisfactory	
Rated by <u>James C. Strickland</u> Chief of Section April 15, 1947 (Signature of rating official) (Title) (Date)		
Reviewed by <u>D. M. Ladd</u> Assistant Director April 15, 1947 (Signature of reviewing official) (Title) (Date)		
Rating approved by efficiency rating committee _____ Report to employee _____ (Date) (Adjective rating)		

# FEDERAL BUREAU OF INVESTIGATION

WASHINGTON 25, D. C.

MR. HERMAN O. BLY  
 PERIODIC PAY INCREASE

Date

April 8, 1947

Personnel Action Number

F.B.I. - 82460

Legal Authority

Nature of Action

Effective May 4, 1947

Position

Special Agent

Grade

GAP 12  
 \$6144.60

Salary

Division

and

Section

Headquarters

Appropriations

S & E, F.B.I. (Natl. Def.)

S & E, F.B.I.

Departmental or Field

Dept.

Field

Dept.

Field

## NATURE OF POSITION

a. VICE

b. ADDITIONAL IDENTICAL

c. NEW

P. C. NO.

P. C. NO.

P. C. NO.

Date of Birth

Date of Oath

REMARKS

From under the Auto. Prom. Bill, Public Law #200 as amended 6-10-45. From under the same bill from \$5180 to \$5390, eff. 10-22-45. BAI to \$6144.60, eff 7-1-46.

85 APR 11 1947

42 #

HERMAN O. BLY

Mr. Bly has been assigned to the Internal Security Section of the Security Division since April 1, 1946. He is presently assigned to the Communist Party desk. This employee has, through conscientiously applying himself to his duties, accumulated a vast knowledge of the background of the Communist Party USA which is so necessary to the intelligent supervision of the cases assigned to him on the Communist Party desk. Mr. Bly has a thorough knowledge of Bureau policy and uses sound judgment in applying it to his work. He is ambitious, makes a good appearance and is a loyal Bureau employee.

Mr. Bly is in every respect an exemplary Agent and is potential SAC material.

Status:     Excellent

2 APR 14 1948  
RECORDED

67- 99243-117
Searched _____
Numbered 58 _____
Filed 3 _____
14 APR 7 1948
FEDERAL BUREAU OF INVESTIGATION

*[Signature]*

*H.O.B.*



# ANNUAL REPORT OF EFFICIENCY RATING

Form approved.  
Budget Bureau No. 50-R0123.  
ADMINISTRATIVE-UNOFFICIAL ( )  
OFFICIAL:  
REGULAR (X) SPECIAL ( )  
PROBATIONAL ( )

As of March 31, 1948 based on performance during period from Apr. 1, '47 to March 31, 1948

Herman O. Bly

(Name of employee)

Special Agent, CAF-12

(Title of position, service, and grade)

Federal Bureau of Investigation, Security Division, Internal Security Section

(Organization—Indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position. a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning <input checked="" type="checkbox"/> All others <input type="checkbox"/>
✓ if adequate		
- if weak		
+ if outstanding		

- |   |   |
|---|---|
| — (1) Maintenance of equipment, tools, instruments.   | — (21) Effectiveness in planning broad programs.  |
| — (2) Mechanical skill.   | — (22) Effectiveness in adapting the work program to broader or related programs.                   |
| + (3) Skill in the application of techniques and procedures.  | — (23) Effectiveness in devising procedures.  |
| + (4) Presentability of work (appropriateness of arrangement and appearance of work).               | — (24) Effectiveness in laying out work and establishing standards of performance for subordinates. |
| + (5) Attention to broad phases of assignments.   | — (25) Effectiveness in directing, reviewing, and checking the work of subordinates.                |
| + (6) Attention to pertinent detail.  | — (26) Effectiveness in instructing, training, and developing subordinates in the work.             |
| + (7) Accuracy of operations.   | — (27) Effectiveness in promoting high working morale.  |
| + (8) Accuracy of final results.  | — (28) Effectiveness in determining space, personnel, and equipment needs.                          |
| + (9) Accuracy of judgments or decisions.   | — (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.               |
| + (10) Effectiveness in presenting ideas or facts.  | — (30) Ability to make decisions.   |
| + (11) Industry.  | — (31) Effectiveness in delegating clearly defined authority to act.                                |
| + (12) Rate of progress on or completion of assignments.  |   |
| + (13) Amount of acceptable work produced. (Is mark based on production records? <u>Yes or no</u> ) |   |
| + (14) Ability to organize his work.  |   |
| + (15) Effectiveness in meeting and dealing with others.  |   |
| + (16) Cooperativeness.   |   |
| + (17) Initiative.  |   |
| + (18) Resourcefulness.   |   |
| + (19) Dependability.   |   |
| + (20) Physical fitness for the work.   |   |

STATE ANY OTHER ELEMENTS CONSIDERED

- (A) \_\_\_\_\_  
— (B) \_\_\_\_\_  
— (C) \_\_\_\_\_

## STANDARD

Deviations must be explained on reverse side of this form

Plus marks on all underlined elements, and check marks or better on all other elements rated \_\_\_\_\_  
Check marks or better on all elements rated, and plus marks on at least half of the underlined elements \_\_\_\_\_  
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance \_\_\_\_\_  
Check marks or better on a majority of underlined elements, and all weak performance not overcompensated by outstanding performance \_\_\_\_\_  
Minus marks on at least half of the underlined elements \_\_\_\_\_

Adjective  
Rating

Excellent  
Very Good  
Good  
Fair  
Unsatisfactory

Adjective  
Rating

Rating official Excellent

Reviewing official \_\_\_\_\_

Rated by F. J. Baumgardner

(Signature of rating official)

Chief of Section

(Title)

March 31, 1948

(Date)

Reviewed by [Signature]

(Signature of reviewing official)

Assistant Director

(Title)

March 31, 1948

(Date)

Rating approved by efficiency rating committee \_\_\_\_\_

(Date)

Report to employee \_\_\_\_\_

(Adjective rating)

November 17, 1948

PERSONAL AND CONFIDENTIAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

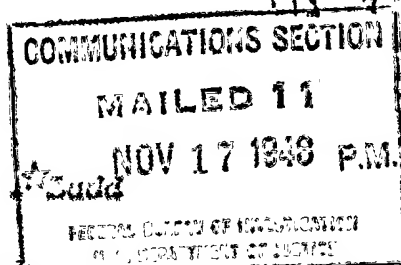
The Bureau is in receipt of the report of the physical examination afforded you at the United States Naval Hospital, Bethesda, Maryland, on October 15, 1948.

This report reflects that you have no disqualifying physical defects and that the electrocardiogram was within normal limits.

The Board of Examining Physicians of the United States Naval Hospital reports that you are capable of performing strenuous physical exertion and have no physical defects that would interfere with your participation in raids or other work involving the practical use of firearms.

Sincerely yours,

EBI  
J. Edgar Hoover  
Director



HLE:tc

Mr. Tolson \_\_\_\_\_  
Mr. E. A. Tamm \_\_\_\_\_  
Mr. Clegg \_\_\_\_\_  
Mr. Glavin \_\_\_\_\_  
Mr. Ladd \_\_\_\_\_  
Mr. Nichols \_\_\_\_\_  
Mr. Rosen \_\_\_\_\_  
Mr. Tracy \_\_\_\_\_  
Mr. Carson \_\_\_\_\_  
Mr. Egan \_\_\_\_\_  
Mr. Gurnea \_\_\_\_\_  
Mr. Harbo \_\_\_\_\_  
Mr. Hendon \_\_\_\_\_  
Mr. Jones \_\_\_\_\_  
Mr. Mumford \_\_\_\_\_  
Mr. Quinn Tamm \_\_\_\_\_  
Mr. Nease \_\_\_\_\_  
Miss Gandy \_\_\_\_\_

15 NOV 20 1948

*[Handwritten signature]*

*[Handwritten mark]*

RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

CC-270

NAME ELY, Herman O. AGE 35 YEARS 3 MONTHS  
NATIVITY (state of birth) Va. MARRIED, SINGLE, WIDOWED: 0 NUMBER OF CHILDREN  
FAMILY HISTORY Mother living and well, father deceased 1933, cerebral hemorrhage all three brothers living and well, no family disease.

HISTORY OF ILLNESS OR INJURY normal child hood diseases, no serious illnesses.  
tonsillectomy 1938

HEAD AND FACE normal

EYES: PUPILS (size, shape, reaction to light and distance, etc.) normal

DISTANT VISION RT. 20/20 corrected to 20/

LT. 20/20 corrected to 20/

COLOR PERCEPTION n

(state edition of Stilling's plates or Lamps used)

DISEASE OR ANATOMICAL DEFECTS n

EARS: HEARING RT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH /15'

LT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH /15'

DISEASE OR DEFECTS none

NOSE normal

(Disease or anatomical defect, obstruction, etc. State degree)

SINUSES normal

TONGUE, PALATE, PHARYNX, LARYNX, TONSILS normal-tonsils out

TEETH AND GUMS (disease or anatomical defect): overbite

MISSING TEETH 1, 13, 16, 17, 32

NONVITAL TEETH n

PERIAPICAL DISEASE n

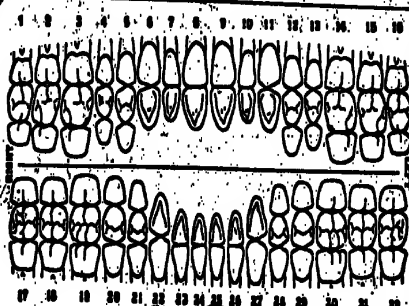
MARKED MALOCCLUSION n

PYORRHEA ALVEOLARIS n

TEETH REPLACED BY BRIDGE n

DENTURES n

REMARKS n



99243-123  
E. G. F. Pollard, D.D.S. (DE) HSN  
(Signature of Dental Officer)

GENERAL BUILD AND APPEARANCE medium

TEMPERATURE 70.4 CHEST AT EXPIRATION 34.5

HEIGHT 70.5 CHEST AT INSPIRATION 37.5

WEIGHT 148 CIRCUMFERENCE OF ABDOMEN AT UMBILICUS 30.5

RECENT GAIN OR LOSS, AMOUNT AND CAUSE n

SKIN, HAIR, AND GLANDS n

NECK (abnormalities, thyroid gland, trachea, larynx) n

SPINE AND EXTREMITIES (bones, joints, tendons, feet) n

31

7/11/36

Handwritten signature and initials.

THORAX (size, shape, movement, rib cage, mediastinum) normal  
RESPIRATORY SYSTEM, BRONCHI, LUNGS, PLEURA, ETC. normal  
chest x-ray neg.

CARDIO-VASCULAR SYSTEM normal  
HEART (note all signs of cardiac involvement) normal  
ECG - within normal limits.

PULSE: BEFORE EXERCISE 72 BLOOD PRESSURE: SYSTOLIC 116  
AFTER EXERCISE 88 DIASTOLIC 78  
THREE MINUTES AFTER 78  
CONDITION OF ARTERIES \_\_\_\_\_ CHARACTER OF PULSE reg  
CONDITION OF VEINS \_\_\_\_\_ HEMORRHOIDS none

ABDOMEN AND PELVIS (condition of wall, scars, herniae, abnormality of viscera) normal

GENITO-URINARY SYSTEM normal  
URINALYSIS: SP. GR. 1.022 ALB. \_\_\_\_\_ SUGAR \_\_\_\_\_ MICROSCOPICAL \_\_\_\_\_  
VENEREAL DISEASE none

NERVOUS SYSTEM normal  
(organic or functional disorders)  
ROMBERG neg INCOORDINATION (gait, speech) none  
REFLEXES, SUPERFICIAL present DEEP (knee, ankle, elbow) normal TREMORS none  
SEROLOGICAL TESTS KAHN NEG. BLOOD TYPE "O" Rh Neg  
ABNORMAL PSYCHE (neurasthenia, psychasthenia, depression, instability, worries) none apparent

SMALLPOX VACCINATION: DATE OF LAST VACCINATION 1943  
TYPHOID PROPHYLAXIS: NUMBER OF COURSES 6  
DATE OF LAST COURSE PA 1943

REMARKS ON ABNORMALITIES NOT OTHERWISE NOTED OR SUFFICIENTLY DESCRIBED ABOVE

SUMMARY OF DEFECTS

CAPABLE OF PERFORMING DUTIES INVOLVING Arduous PHYSICAL EXERTION

IS THIS INDIVIDUAL PHYSICALLY FIT TO PARTICIPATE IN RAIDS AND APPREHENSION OF CRIMINALS  
WHICH MIGHT ENTAIL THE PRACTICAL USE OF FIREARMS yes (yes or no)  
(when no is given state cause)

FINDINGS, RECOMMENDATIONS AND REMARKS (as per boards, when necessary)  
No recommendations.

A. J. White  
Capt. MC USN Ret.

DATE OF EXAMINATION 10/15/48

U. S. DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

Approved by  
Checked by  
M. L.

*gm*

MR. HERMAN O. BLY  
MR. HERMAN O. BLY  
PERIODIC PAY INCREASE

WASHINGTON 25, D. C.

Date  
October 26, 1948

Personnel Action Number  
F. B. I. - 25171 25171

Legal Authority

Nature  
of Action

Effective  
November 14, 1948

Effective

Position

Special Agent

Grade

CAF 12  
\$6714

Salary

Division

and

Section

Headquarters

Appropriations

S & E, F.B.I.

S & E, F.B.I.

Departmental  
or Field

☐ Dept.

Field ☒

Dept. ☐

Field ☐

NATURE OF POSITION

a. VICE	b. ADDITIONAL IDENTICAL	c. NEW
P. C. NO.	P. C. NO.	P. C. NO.
Date of Birth		Date of Oath

REMARKS

From. under the Auto. Prom. Bill, Public Law  
#200 as amended 6-30-45. & From. under the same  
Bill from \$6144.60 to \$6304 in CAF 12 5-4-47.  
\$61 to \$6714 7-11-48. Last efficiency rating -  
HIGHLIGHT.

*gm/bm*

~~REMOVED~~

*Bm*

*W. J. Galt*

*38*

ANNUAL  
REPORT OF  
EFFICIENCY RATING

Form approved.  
Budget Bureau No. 50-R012.3.

ADMINISTRATIVE-UNOFFICIAL ( )  
OFFICIAL:  
REGULAR ( ) SPECIAL ( )  
PROBATIONAL ( )

As of March 31, 1949 based on performance during period from Apr. 1, '48 to March 31, 1949

Herman O. Bly  
(Name of employee)

Special Agent, CAF-12  
(Title of position, service, and grade)

Federal Bureau of Investigation, Security Investigative Division, Internal Security  
(Organization—Indicate bureau, division, section, unit, field station) Section

ON LINES BELOW MARK EMPLOYEE ✓ if adequate - if weak + if outstanding	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position. a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning ----- <input checked="" type="checkbox"/> All others ----- <input type="checkbox"/>
---	---	---

- \_\_\_\_ (1) Maintenance of equipment, tools, instruments.  
\_\_\_\_ (2) Mechanical skill.  
+ (3) Skill in the application of techniques and procedures.  
+ (4) Presentability of work (appropriateness of arrangement and appearance of work).  
+ (5) Attention to broad phases of assignments.  
+ (6) Attention to pertinent detail.  
+ (7) Accuracy of operations.  
+ (8) Accuracy of final results.  
+ (9) Accuracy of judgments or decisions.  
+ (10) Effectiveness in presenting ideas or facts.  
+ (11) Industry.  
+ (12) Rate of progress on or completion of assignments.  
+ (13) Amount of acceptable work produced. (Is mark based on production records? \_\_\_\_\_) (Yes or no)  
+ (14) Ability to organize his work.  
+ (15) Effectiveness in meeting and dealing with others.  
+ (16) Cooperativeness.  
+ (17) Initiative.  
+ (18) Resourcefulness.  
+ (19) Dependability.  
+ (20) Physical fitness for the work.

- \_\_\_\_ (21) Effectiveness in planning broad programs.  
\_\_\_\_ (22) Effectiveness in adapting the work program to broader or related programs.  
\_\_\_\_ (23) Effectiveness in devising procedures.  
\_\_\_\_ (24) Effectiveness in laying out work and establishing standards of performance for subordinates.  
\_\_\_\_ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.  
\_\_\_\_ (26) Effectiveness in instructing, training, and developing subordinates in the work.  
\_\_\_\_ (27) Effectiveness in promoting high working morale.  
\_\_\_\_ (28) Effectiveness in determining space, personnel, and equipment needs.  
\_\_\_\_ (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.  
\_\_\_\_ (30) Ability to make decisions.  
\_\_\_\_ (31) Effectiveness in delegating clearly defined authority to act.

9924-126  
STATE ANY OTHER ELEMENTS CONSIDERED

- \* (A) Capability for Additional Responsibility  
\_\_\_\_ (B) \_\_\_\_\_  
\_\_\_\_ (C) \_\_\_\_\_

STANDARD  
Deviations must be explained on reverse side of this form

Plus marks on all underlined elements, and check marks or better on all other elements rated.  
Check marks or better on all elements rated, and plus marks on at least half of the underlined elements.  
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance.  
Check marks or better on a majority of underlined elements, and all weak performance not overcompensated by outstanding performance.  
Minus marks on at least half of the underlined elements.

Adjective Rating  
Excellent  
Very Good  
Good  
Fair  
Unsatisfactory

Rating official Excellent  
Reviewing official \_\_\_\_\_

Rated by A. J. P. Baumgardner  
(Signature of rating official)

Chief of Section  
(Title)

March 31, 1949  
(Date)

Reviewed by D. M. Ladd  
(Signature of reviewing official)

Assistant Director  
(Title)

March 31, 1949  
(Date)

Rating approved by efficiency rating committee \_\_\_\_\_  
(Date)

Report to employee  
(Adjective rating)

HERMAN O. BLY

Mr. Bly has been assigned as a Supervisor in the Security Investigative Division since April 1, 1946. He is currently assigned as Supervisor of the "Overthrow or Destruction of Government" Desk. In addition to handling the many ramifications of the Communist Party - USA, Mr. Bly analyzes pending legislation and prepares summary memoranda for dissemination to various intelligence agencies and high ranking Government officials.

He is an excellent dictator and his memoranda and letters are prepared in an excellent fashion. He organizes his work well and has sufficient initiative to supervise complicated investigative matters with very little supervision. He accepts responsibility and discharges his supervisory duties in a most satisfactory manner. His physical condition is such that he could function on any type of assignment and he is available for either special or general assignment anywhere his services may be needed by the Bureau.

He has through careful study and attention to duty accumulated a great deal of knowledge regarding the background and current activities of the Communist Party. He is undoubtedly one of the best informed men in the Bureau today in this respect. He has a thorough knowledge of the Bureau's policy and uses sound judgment in applying this policy to his every day tasks.

He is in every respect satisfactory and is potential SAC material.

Status: Excellent

*H.O.B.*

U.S. DEPARTMENT OF JUSTICE

## FEDERAL BUREAU OF INVESTIGATION

Prepared by  
Checked by  
Filed by*Jah*  
*Per*

WASHINGTON 25, D.C.

MR. HERMAN O. BLY

Mr. Herman O. Bly  
PROMOTIONNature  
of Action

Date

July 22, 1949

Personnel Action Number

F.B.I.- 1330 1330

Legal Authority

Effective

July 24, 1949

	FROM	TO
Position	Special Agent	same
Grade	CAP 12	CAP 13
Salary	\$6953.40	\$7432.20
Division and Section Headquarters		
Appropriations	S & E, F.B.I.	S & E, F.B.I.
Departmental or Field	<input type="checkbox"/> Dept.	<input checked="" type="checkbox"/> Field

## NATURE OF POSITION

a. VICE	b. ADDITIONAL IDENTICAL	c. NEW
	X X X X X X	
P.C. NO.	P.C. NO.	P.C. NO.
Date of Birth		Date of Oath

REMARKS

Pr

84-JUL-28-1949

*Jah*  
*Per*

The provisions of the Veterans' Preference Act of 1944 and/or the Selective Service Act of 1948 have been duly complied with.

67-501 AUG 1949



August 12, 1950

0  
Mr. Herman C. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

It is a real pleasure for me to have this opportunity to extend to you my hearty congratulations, and present to you this Ten-Year Service Award Key on the occasion of your Tenth Anniversary with the Bureau.

In your tour of duty at the Seat of Government, you have had an opportunity to participate first-hand in many of the matters which have glorified the Bureau's history. From these I know you have not only acquired a deep appreciation of the tremendous problems confronting us, but from your record of performance, I am convinced you have contributed a great deal to the successes we have had. I hope your continued interest will assist us in making still greater strides in the future.

May we continue to receive the benefit of your ability and experience for many years to come.

With best wishes,

Sincerely,

99243-133

57

Delivered by Special Messenger  
8-11-50  
amb

Enclosure

CC: Mr. Belmont  
CC: Voucher Section  
KAC:JHR

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Nichols \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Harbo \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Nease \_\_\_\_\_  
Gandy \_\_\_\_\_

RECEIVED READING ROOM  
FBI  
U.S. DEPT. OF JUSTICE  
JUN 20 2 06 PM '50  
JHR

December 28, 1950

0  
Mr. Herman O. Bly  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

Dear Mr. Bly:

My attention has been called to your participation in the forum discussion held for Major Clemente Gomez Siera, Chief of the Investigative Unit of the Cuban Army, and his aide, Captain Orlando Garcia Iglesias.

I want you to know that I am personally aware of your fine services on this occasion and I want to express to you my sincere appreciation.

Sincerely,

cc: Mr. Belmont

(PAC) J. Edgar Hoover

GRD:bmc

17 JAN 18 1951

RECEIVED - DIRECTOR  
F. B. I.  
U. S. DEPT. OF JUSTICE  
DEC 28 7 22 PM '50

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Nichols \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Harbo \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Nease \_\_\_\_\_  
Gandy \_\_\_\_\_

MAILED 10  
JAN 2 1951  
COMM. DIV.

RECEIVED - DIRECTOR  
F. B. I.  
U. S. DEPT. OF JUSTICE  
DEC 28 4 13 PM '50

1. Agency and organizational designations <b>DEPARTMENT OF JUSTICE</b>				2. Pay roll period		3. Block No.		4. Slip No. <b>19350</b>	
5. Employee's name <b>MR. HERMAN O. BLK</b>						6. Grade and salary <b>GA GS 13 \$7600</b>			
<b>PAY ROLL CHANGE DATA</b>									
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND			NET PAY
7. Previous normal									
8. New normal									
9. Pay this period									
10. Remarks:					11. Appropriation(s) <div style="text-align: center;"><del>80 JAN 29 1951</del></div>		12. Prepared by <div style="text-align: center;"><i>[Signature]</i></div>		
							13. Audited by		
<input type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase									
14. Effective date <b>1-21-51</b>	15. Date last equivalent increase <b>7-21-49</b>	16. Old salary rate <b>\$7500</b>	17. New salary rate <b>\$7600</b>	18. (a) Efficiency rating is good or better than good and service and <b>PERF. rating - SAT.</b> (b) <div style="text-align: center;">(SIGNATURE OR OTHER AUTHENTICATION)</div>			19. Suspense date <b>1-17-51</b>		
20. LWOP data (Fill in appropriate spaces covering LWOP during following periods:)					(Check applicable box in case of excess LWOP)				
Period(s): <b>m</b>					<input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.				
<input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP _____					<b>Initials of Clerk</b> <div style="text-align: center;"><i>[Signature]</i></div>				

STANDARD FORM NO. 1126d  
Form prescribed by Comp. Gen., U. S.  
Feb. 3, 1950, General Regulations No. 102

**PAY ROLL CHANGE SLIP—PERSONNEL COPY**

September 26, 1951

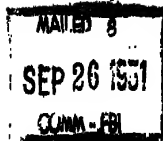
Mr. Herman O. Bly  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

Dear Mr. Bly:

The very fine way in which you participated in the two-day indoctrination course held recently at the Bureau relative to a most important Internal Security matter has been brought to my attention.

I want to take this opportunity to extend to you my sincere appreciation and commendation for the very intelligent manner in which you made this timely information available to the conference. You may be proud indeed of your contribution concerning this vital undertaking.

Sincerely,



Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Nichols \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Harbo \_\_\_\_\_  
Alben \_\_\_\_\_  
Belmont \_\_\_\_\_  
Laughlin \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Nease \_\_\_\_\_  
Gandy \_\_\_\_\_

SEP 26 1951

CC: Mr. Belmont

SEP 26 1951

RECEIVED DIRECTOR

WST:cm

RECEIVED  
SEP 26 1951  
U. S. DEPT. OF JUSTICE

99242-159

117

134

*[Handwritten signature]*

*[Handwritten signature]*

412  
51

RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

CC-270  
(1-1-50)

NAME BLY, Herman O. AGE 38 YEARS, 8 MONTHS  
NATIVITY (state of birth) Va. MARRIED, SINGLE, WIDOWED: married NUMBER OF CHILDREN 0  
FAMILY HISTORY Father deceased - age 51 - cerebral hemorrhage.  
Mother age 69 - in good health.

HISTORY OF ILLNESS OR INJURY No serious illness or injury.  
T. & A.

HEAD AND FACE N  
EYES: PUPILS (size, shape, reaction to light and distance, etc.) N

DISTANT VISION RT. 20/ 20 , corrected to 20/

LT. 20/ 20 , corrected to 20/

COLOR PERCEPTION Normal AOC 1940

(state edition of Stilling's plates or Lamps used)

DISEASE OR ANATOMICAL DEFECTS No

EARS: HEARING RT. WHISPERED VOICE /15' CONVERSATIONAL SPEECH 15/15'

LT. WHISPERED VOICE /15' CONVERSATIONAL SPEECH 15/15'

DISEASE OR DEFECTS No

NOSE N

(Disease or anatomical defect, obstruction, etc. State degree)

SINUSES N

TONGUE, PALATE, PHARYNX, LARYNX, TONSILS N

TEETH AND GUMS (disease or anatomical defect):

MISSING TEETH #1, #13, #16, #17, #32

NONVITAL TEETH

PERIAPICAL DISEASE

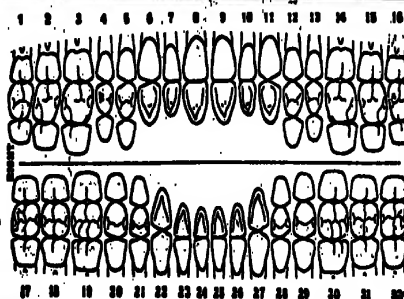
MARKED MALOCCLUSION

PYORRHEA ALVEOLARIS

TEETH REPLACED BY BRIDGES

DENTURES

REMARKS



s/J.E. O'Malley LTJG DC USN

(Signature of Dental Officer)

GENERAL BUILD AND APPEARANCE Med.

TEMPERATURE Normal

CHEST AT EXPIRATION 35"

HEIGHT 70"

CHEST AT INSPIRATION 61-92-43-140

WEIGHT 155

CIRCUMFERENCE OF ABDOMEN AT UMBILICUS 32"

RECENT GAIN OR LOSS, AMOUNT AND CAUSE No

SKIN, HAIR, AND GLANDS

NECK (abnormalities, thyroid gland, trachea, larynx) N

SPINE AND EXTREMITIES (bones, joints, muscles, feet) N

11 MAR 25 1952

32

THORAX (size, shape, movement, rib cage, mediastinum) N  
RESPIRATORY SYSTEM, BRONCHI, LUNGS, PLEURA, ETC. X-ray - neg.  
267320

CARDIO-VASCULAR SYSTEM Normal ECG  
HEART (note all signs of cardiac involvement) N

PULSE: BEFORE EXERCISE 84 BLOOD PRESSURE: SYSTOLIC 120  
AFTER EXERCISE 90 DIASTOLIC 72  
THREE MINUTES AFTER 84  
CONDITION OF ARTERIES good CHARACTER OF PULSE Reg.  
CONDITION OF VEINS good HEMORRHOIDS No

ABDOMEN AND PELVIS (condition of wall, scars, hernia, abnormality of viscera) N

GENITO-URINARY SYSTEM N  
URINALYSIS: SP. GR. 1.011 ALB. neg. SUGAR neg. MICROSCOPICAL N  
VENEREAL DISEASE No

NERVOUS SYSTEM N  
(organic or functional disorders)  
ROMBERG N INCOORDINATION (gait, speech) N  
REFLEXES, SUPERFICIAL: N DEEP (knee, ankle, elbow) N TREMORS No  
SEROLOGICAL TESTS Kahn - neg. BLOOD TYPE O+ Rh  
ABNORMAL PSYCHE (neurasthenia, psychasthenia, depression, instability, worries) No

SMALLPOX VACCINATION: DATE OF LAST VACCINATION \_\_\_\_\_  
TYPHOID PROPHYLAXIS: NUMBER OF COURSES \_\_\_\_\_  
DATE OF LAST COURSE \_\_\_\_\_  
REMARKS ON ABNORMALITIES NOT OTHERWISE NOTED OR SUFFICIENTLY DESCRIBED ABOVE \_\_\_\_\_

SUMMARY OF DEFECTS None

CAPABLE OF PERFORMING DUTIES INVOLVING Strenuous PHYSICAL EXERTION

IS THIS INDIVIDUAL PHYSICALLY FIT TO PARTICIPATE IN RAIDS AND APPREHENSION OF CRIMINALS  
WHICH MIGHT ENTAIL THE PRACTICAL USE OF FIREARMS Yes (yes or no).  
(when no is given state cause)

FINDINGS, RECOMMENDATIONS AND REMARKS (as per boards, when necessary) \_\_\_\_\_

DATE OF EXAMINATION 3/11/52 S/H.E. Taylor LTJG  
EMPLOYEE'S INITIALS 3/11/52

March 19, 1952

PERSONAL & ~~CONFIDENTIAL~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

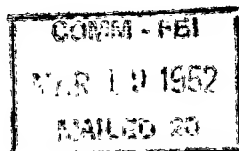
The Bureau is in receipt of the report of the physical examination afforded you at the United States Naval Hospital, Bethesda, Maryland, on March 11, 1952.

This report reflects that you have no disqualifying physical defects.

The electrocardiogram afforded you in this connection was within normal limits.

The Board of Examining Physicians of the United States Naval Hospital reports that you are capable of performing strenuous physical exertion and have no physical defects that would interfere with your participation in raids or other work involving the practical use of firearms.

Sincerely yours,



*J. E. Hoover*  
John Edgar Hoover  
Director

CC-Domestic Intelligence

(~~P & C~~)

JVB:mfc

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Nichols \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Harbo \_\_\_\_\_  
Alden \_\_\_\_\_  
Belmont \_\_\_\_\_  
Laughlin \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Nease \_\_\_\_\_  
Gandy \_\_\_\_\_

April 19, 1952

Mr. Fred J. Baumgardner  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

*Herman O. Bly*

Dear Mr. Baumgardner:

I want to express to you and through you to the Supervisors of the Internal Security Unit my sincere appreciation for the splendid fashion in which the recent Security-Spionage Schools were conducted at the Bureau.

It is my desire that you personally convey my gratitude and commendation to those Supervisors who contributed so materially to the success of these schools, advising them that I was most pleased with the efficient and capable manner in which this project was handled. I consider this was a job well done.

Sincerely yours,

cc: Mr. Belmont ~~(Pac)~~ J. Edgar Hoover

cc: Personnel files of SA's:

Herman O. Bly  
J. Wayne Parrish  
Paul L. Cox  
Richard W. Corman  
Joseph D. Donohue  
Marion E. Torrens

Carroll Doyle  
John J. Henry  
James F. Bland  
Arthur E. Dooley  
Earl F. Lane  
James L. McGovern

Roy D. Simpson

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Harbo \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Laughlin \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Rm. \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

67-136594

EJI:bmc

*bmc*

67-89243-144

Searched \_\_\_\_\_  
Numbered \_\_\_\_\_  
APR 23 1952

DUPLICATE YELLOW

ORIGINAL FILE IN 67-136594-187



U. S. DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON 25, D. C.

FORM APPROVED  
BUDGET BUREAU NO. 30-2064

Prepared by *MM*  
Checked by *MM*  
Filed by *MM*

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., FIRST, MIDDLE INITIAL, LAST) <b>MR. HERMAN O. Bly</b> <b>ED. JAMES O. BLY</b>		2. DATE OF BIRTH <b>7-22-23</b>	3. JOURNAL OR ACTION NO. <b>F.B.I. 972</b> <b>972</b>	4. DATE <b>7-22-52</b>		
This is to notify you of the following action affecting your employment: 5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>PROMOTION</b>					6. EFFECTIVE DATE <b>7-22-52</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Executive Order 6105 (S)</b>
FROM		TO				
Special Agent <b>GS 13</b> <b>\$6,400 per annum</b>		8. POSITION TITLE	9. SERVICE, GRADE, SALARY <b>GS 14</b> <b>\$8,000 per annum</b>			
		10. ORGANIZATIONAL DESIGNATIONS				
		11. HEADQUARTERS	TITLE CHANGED TO SUPV. SA SERIES 1811 FBI #61-F-101 EFF. 4-30-61			
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL			
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> WWII <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> MAR. <input type="checkbox"/> WIFE <input type="checkbox"/> WIDOW <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L. A. <input type="checkbox"/> REAL <input type="checkbox"/>				
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> N <input type="checkbox"/> O	17. APPROPRIATION S. & E., FBI FROM: TO:		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <input checked="" type="checkbox"/>	19. DATE OF OATH (ACCESSIONS ONLY) <b>7-22-52</b>	20. LEGAL RESIDENCE <b>7-22-52</b>
REMARKS <p>The provisions of the Government Employees Military Service and Credits Act of 1952 have been complied with.</p> <p>This person's position is temporary in nature consistent with Public Law 482, approved 8-27-52.</p> <p>The classification grade of this position is subject to post-audit and correction pursuant to Section 130 of the Supplemental Appropriation Appropriation Act, 1952 - Public Law 482, approved 11-4-52.</p> <p>80 JUL 24 1952</p> <p>31</p> <p>350-631133</p> <p>SIGNATURE OR OTHER AUTHENTICATION <i>[Signature]</i></p>						

8. FILE  
*C*

January 23, 1953

Mr. Herman S. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

It is indeed a pleasure to advise you that you have been recommended for promotion from \$9600 per annum to \$9800 per annum in Grade GS 1, as an award for superior accomplishment. The effective date of this increase will follow approval by the Committee on Superior Accomplishment Awards concerning which you will be informed later.

I have taken this action in view of your outstanding supervision at the Seat of Government of the investigation and trial of the thirteen Communist Party functionaries who were convicted for violation of the Smith Act in New York City on January 14, 1953. Your aggressive approach to the problems which were confronted in connection with this matter was certainly an inspiration to other employees and your efforts contributed largely to the successful results accomplished. Please accept my sincere personal thanks and commendation for a job well done.

Sincerely yours,

CC: Mr. Belmont (PERSONAL ATTENTION)

CC: Movement Section

CC: Miss Usilton

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Harbo \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Mohr \_\_\_\_\_

JH:jks  
67-99213

67-99213-11

67-99213-12

67-99213-13

179

# REPORT OF MEDICAL EXAMINATION

1. NAME—FIRST NAME—MIDDLE NAME BLY, Herman O.		2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION Annual	6. DATE OF EXAMINATION 2/26/53
7. SEX Male	8. RACE White	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT		12. DATE OF BIRTH 7/12/13	
13. PLACE OF BIRTH Virginia		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS NNMC - Bethesda, Md.		16. OTHER INFORMATION	

17. RATING OR SPECIALTY	TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
NOTES—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)		

CLINICAL EVALUATION	
NORMAL	ABNORMAL
X	18. HEAD, FACE, NECK, AND SCALP
X	19. NOSE
X	20. SINUSES
X	21. MOUTH AND THROAT
X	22. EARS—GENERAL (Int. & ext. exam) (Audiometry under items 70 and 71)
X	23. DRUMS (Percussion)
X	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26, and 27)
N.R.	25. OPHTHALMOSCOPIC
X	26. PUPILS (Equality and reaction)
X	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
X	28. LUNGS AND CHEST (Include breasts)
X	29. HEART (Thrust, size, rhythm, sounds)
X	30. VASCULAR SYSTEM (Varicose veins, etc.)
X	31. ABDOMEN AND VISCERA (Include hernia)
X	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate if indicated)
X	33. ENDOCRINE SYSTEM
X	34. G-U SYSTEM
X	35. UPPER EXTREMITIES (Strength, range of motion)
X	36. FEET
X	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)
X	38. SPINE, OTHER MUSCULOSKELETAL
X	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
X	40. SKIN, LYMPHATICS
X	41. NEUROLOGIC (Regulation tests under item 72)
N.R.	42. PSYCHIATRIC (Specify any personality deviation)
Females only (Check how done)	
	43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

32. Fissure, anus.

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES
O—Restorable teeth X—Missing teeth (X X X)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by dentures		
X 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 X X 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 X		Type III Class I 99243-160

LABORATORY FINDINGS		47. SEROLOGY (Specify test used and result)
45. URINALYSIS: SP. GR. 1.017	46. CHEST X-RAY (Place, date, film number, result)	Neg.
ALBUMIN H SUGAR N MICROSCOPIC N	Neg.	
48. EKG	49. BLOOD TYPE AND RH FACTOR	

50. OTHER TESTS
Normal

MEASUREMENTS AND OTHER FINDINGS																																			
51. HEIGHT 5' 9 1/2"		52. WEIGHT 156		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: SLENDER <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> HEAVY <input type="checkbox"/> OBESE <input type="checkbox"/>		56. TEMP. Normal																									
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)																													
SITTING SYS. 116 DAS. 76		RECUM- BENT SYS. DAS.		STANDING (3 min.) SYS. DAS.		SITTING 80		AFTER EXERCISE		3 MIN. AFTER RECUMBENT AFTER STANDING 3 MIN.																									
59. DISTANT VISION *				60. REFRACTION				61. NEAR VISION																											
RIGHT IN/ 20		CORR. TO IN/		BY S. CX		CORR. TO		BY																											
LEFT IN/ 20		CORR. TO IN/		BY S. CX		CORR. TO		BY																											
62. HETEROPHORIA: (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD																																			
63. ACCOMMODATION RIGHT N LEFT N				64. COLOR VISION (Test used and result) Normal				65. DEPTH PERCEPTION (Test used and score) UNCONNECTED CONNECTED																											
66. FIELD OF VISION N				67. NIGHT VISION (Test used and score)				68. RED LENS																											
69. INTRAOCULAR TENSION																																			
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)																											
RIGHT WV 15 /15 SV 15 /15		<table border="1"> <thead> <tr> <th></th> <th>250 CPS</th> <th>500 CPS</th> <th>1000 CPS</th> <th>2000 CPS</th> <th>3000 CPS</th> <th>4000 CPS</th> <th>8000 CPS</th> </tr> </thead> <tbody> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							250 CPS	500 CPS	1000 CPS	2000 CPS	3000 CPS	4000 CPS	8000 CPS	RIGHT								LEFT											
	250 CPS	500 CPS	1000 CPS	2000 CPS	3000 CPS	4000 CPS	8000 CPS																												
RIGHT																																			
LEFT																																			

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Tonsilectomy 1938.  
Past 23 mos. feeling of discomfort low abd. and left thigh on bending.  
Respiratory "flu" 4 weeks ago with course aureo and terra. One week later one diarrheal stool daily, with blood, for 1 week (2 weeks ago) when noted burning on defecation, and then noted a hemorrhoid. This was excised on 2/28/53. Few stools past 5 days and on 2/24/53 cup of red blood in stool. Seen by LMD. No further bleeding. Is a chronic laxative taker.

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

Fissure, anus (corrected)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)		76. PHYSICAL PROFILE					
1. Proctology consult - done		P	U	L	H	E	S
77. EXAMINEE (Check) <input checked="" type="checkbox"/> IS QUALIFIED FOR <input type="checkbox"/> IS NOT		PHYSICAL CATEGORY					
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER		A	B	C	E		
79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE s/R. T. Miller					
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate as blank)		SIGNATURE s/A. T. Smith					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE					
		NUMBER OF AT- TACHED SHEETS 2					

BLY, Herman Olin

Civ Hum Non-Ind

3-18-53      Admitted this date with diagnosis of:  
Fissure, anus. #5740

OPERATIONS:

3/19/53      Sphincterotomy, anal. #455

SUMMARY:

Admitted complaining of rectal discomfort of approximately three months duration. Approximately three weeks prior to onset had severe diarrhea following treatment with Aureomycin. One episode of bright red bleeding following defecation in January this year.

Physical examination negative except for moderate anal sphincter spasm and tenderness posteriorly on the right.

On 3/19/53 patient was taken to the operating room and some scar tissue was excised and a posterior superficial sphincterotomy was performed.

Postoperatively patient did well. Discharged to home on sitz bath and metamucil therapy, to return for out-patient care.

3/20/53      Discharged to home this date.

D  
2

s/C. S. Durden  
LT MC USN

SLY, Herman G.

Staff Clinic

PROCTOLOGY

2/26/53

This F.B.I. Agent noted low abd. discomfort 2-3 mos. ago, on forward bending. Also noted change in bowel habits at that time, becoming constipated. Took laxatives regularly. 4 weeks ago resp. flu and ex by LFD with aureo. and terra. for 4 days. One week later developed a painful hemorrhoid which was excised. Two days later passed about 1 cup red blood. No blood since. This man has been having ribbon stools past 2-3 mos. Would appreciate opinion. Thanks.

Prov. Diag. - Hemorrhoids, mixed.

s/R. T. Miller

2/27/53. Has a small, but chronic, anal fissure at site of previous thrombosed hemorrhoid. Sigmoidoscopy otherwise negative. All symptoms, including ribbon stools and abd. pain, can be related to fissure, but would advise barium enema prior to surgery.

s/Gerber

2/27/53 - A barium enema reveals the large bowel to fill well and empty well. No abnormalities were noted.

24

67-99243-160

UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON 25, D. C.

Prepared by: *RHS*  
Checked by: *[Signature]*  
Filed by: *[Signature]*  
REPORT NO. **13**  
3-185

March 2, 1953

Name:

*Mr. Herman O. Bly*

Nature of Action: Superior Accomplishment Step Increase

Effective date:

*February 15, 1953*

CIVIL SERVICE  
OR OTHER LEGAL  
AUTHORITY

Part 25, Sec. 25.16

	From	To	Appropriation
Position	<i>Special Agent</i>	<i>Same</i>	REGULAR
Grade and Salary	<i>GS 14, \$9600</i>	<i>GS 14, \$9800</i>	Date of Birth
Bureau or Other Unit			<i>7-13-13</i>
Headquarters			
Departmental or Field	<i>Field</i>	<i>Same</i>	

Approved by the Attorney General:

*February 12, 1953*

Last salary increase:

*Promotion from \$8560 per annum in Grade GS 13, to \$9600*

Last superior accomplishment: *per award in Grade GS 14, effective 7-20-52.*

*WMO*

Attachment: Justification for Civil Service Commission

File No. 67-99243

*JW:fkf*

Sincerely yours,

*J. Edgar Hoover*

John Edgar Hoover  
Director

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Harbo \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Rm. \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

REPORT TO U. S. CIVIL SERVICE COMMISSION

1. Agency and organizational designations U.S. Department of Justice Federal Bureau of Investigation		2. Pay roll No.	3. Block No.	4. Slip No. 15679
5. Employee's name (and social security account number when appropriate) MR. HIRSHAN O. RAY		6. Grade and Salary SA GS 14 \$9600		

### PAY ROLL CHANGE DATA

	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F. I. C. A.	NET PAY
7. Previous normal								
8. New normal								
9. Pay this period								

10. Remarks:	11. Appropriation(s) 33	12. Prepared by
	13. Audited by	

<input checked="" type="checkbox"/> Periodic step-increase		<input type="checkbox"/> Pay adjustment	<input checked="" type="checkbox"/> Other step-increase	<b>SUPERIOR ACHIEVEMENT</b>	
14. Effective date 8-15-51	15. Date last equivalent increase 7-29-50	16. Old salary rate \$9600	17. New salary rate \$9800	18. Performance rating is satisfactory or better.	

19. LWOP data (Fill in appropriate spaces covering LWOP during following periods): Period(s): <del>30 FEB 27 1952</del>	(Check applicable box in case of excess LWOP) <input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.
<input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP _____	

STANDARD FORM NO. 1126—Revised  
Form prescribed by Comp. Gen., U. S.  
Nov. 6, 1950, General Regulations No. 102

PAY ROLL CHANGE SLIP—PERSONNEL COPY



# OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>OLIN, HERMAN OLIN</b>		2. GRADE AND COMPONENT OR POSITION <b>SA</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (House, street or R.F.D., city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>	6. DATE OF EXAMINATION <b>2-2-54</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7-12-13</b>	
13. PLACE OF BIRTH <b>Virginia</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NNMC- Bethesda</b>		16. OTHER INFORMATION	

17. RATING OR SPECIALTY	TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
-------------------------	------------------------------	-----------------

CLINICAL EVALUATION		NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)
NORMAL	ABNOR- MAL	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP
<input checked="" type="checkbox"/>	<input type="checkbox"/>	19. NOSE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	20. EARS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	21. MOUTH AND THROAT
<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. EARS—GENERAL (Int. & ext. canals) (Audiology usually under items 70 and 71)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	23. DRUMS (Perforation)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26, and 27)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. OPHTHALMOSCOPIC
<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. PUPILS (Equality and reaction)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. LIMBS AND CHEST (Include breasts)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. VASCULAR SYSTEM (Varicose veins, etc.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Presence if indicated)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	33. ENDOCRINE SYSTEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	34. G-U SYSTEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	36. FEET
<input checked="" type="checkbox"/>	<input type="checkbox"/>	37. LOWER EXTREMITIES (Strength, range of motion)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL
<input checked="" type="checkbox"/>	<input type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	40. SKIN, LYMPHATICS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	41. NEUROLOGIC (Special tests under item 70)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviation)
Females only (Check how done)		
43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL		

History anal fissure

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DIRECTIVES DISEASES Type III Class I 992-4-16
O.—Restorable tooth    X.—Missing tooth    (X X)—Fixed bridge, brackets to include abutments I.—Nonrestorable tooth    XXX—Replaced by dentures		
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31		

46. URINALYSIS: SP. GR. <b>1.023</b>		47. CHEST X-RAY (Place, date, film number, result)	48. SEROLOGY (Specify test used and result)
ALBUMIN	SUGAR	MICROSCOPIC	
Neg	Neg	Negative	NEG (14x17)
49. BLOOD TYPE AND RH FACTOR		50. OTHER TESTS	
ECG—normal			

FEB 25 1954

MEASUREMENTS AND OTHER FINDINGS																										
51. HEIGHT 5' 10"	52. WEIGHT 157	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: SLENDER MEDIUM HEAVY OBSE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	56. TEMP. Normal																					
57. BLOOD PRESSURE (Arms at heart level)			58. PULSE (Arms at heart level)																							
SITTING SYS 110 DAS. 70	RECU- BENT SYS DAS	STANDING (8 mcs.) SYS DAS	AFTER EXERCISE 92	2 MIN. AFTER 80	RECU- BENT AFTER STANDING 3 MIN.																					
59. DISTANT VISION		60. REFRACTION		61. NEAR VISION																						
RIGHT 20	CORR. TO 20	BY S	CR	CORR. TO	BY																					
LEFT 20	CORR. TO 20	BY S	CR	CORR. TO	BY																					
62. METEOROPHORIA: (Specify distance) ES° EX R. H. L. H. PRISM DIV. PRISM CONV. PC PD																										
63. ACCOMMODATION RIGHT LEFT		64. COLOR VISION (That used and seen) AOC 1/40 Normal		65. DEPTH PERCEPTION (That used and seen) UNCONNECTED CONNECTED																						
66. FIELD OF VISION		67. NIGHT VISION (That used and seen)		68. RED LENS 69. INTRAOCULAR TENSION																						
70. HEARING		71. AUDIOMETER																								
RIGHT WV 15 /15 SV 15 /15 LEFT WV 15 /15 SV 15 /15		<table border="1"> <thead> <tr> <th></th> <th>250</th> <th>500</th> <th>1000</th> <th>2000</th> <th>4000</th> <th>8000</th> </tr> </thead> <tbody> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					250	500	1000	2000	4000	8000	RIGHT							LEFT						
	250	500	1000	2000	4000	8000																				
RIGHT																										
LEFT																										
72. PSYCHOLOGICAL AND PSYCHOMOTOR (That used and seen)																										

## 73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

History of anal fissure removed last year because of pain and constipation. Symptoms have remained with lower abdominal pain, flatus and constipation.

## PROCTOLOGY:

Reason for request: Art underwent operation for fissure in anal 1 yr. ago. Continued to have symptoms of constipation, flatus, lower abd. pain.

Provisional diagnosis: ? anal or rectal fissure

Dr's signature: s/ Olmsted

Consult: external exam neg- no hemorrhoids, fissure or fistula. Site of previous excision of fissure shows good scar tissue. Anal sphincter inital shows marked spasm but no sterosis. Remainder of proctoscopic exam up to 20 cms neg- Bowel well prepared-mucosa healthy. Advise bulk forms added to diet-such as metamucil. JOHN W. TROY (2-17-54)

Barium Enema: 2-18-54: reveals normal colon. Terminal ileum & appendix are not unusual. Colon emptied readily & mucosa was normal. J. W. FRIES,

## 74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)		76. PHYSICAL PROFILE	
Proctology consultation		P U L N E S	
Barium enema			
77. EXAMINEE (Check) <input checked="" type="checkbox"/> IS QUALIFIED FOR strenuous physical exertion and use of firearms. <input type="checkbox"/> IS NOT		PHYSICAL CATEGORY	
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER		A B C E	
79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE s/R. W. Olmsted	
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE s/ A. T. Smith CDR DC USN	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE NUMBER OF ATTACHED SHEETS	

PORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>BLY HERMAN OLIN</b>		2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)		5. PURPOSE OF EXAMINATION	6. DATE OF EXAMINATION <b>FEB 2 1954</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7/12/13</b>	
13. PLACE OF BIRTH <b>VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS		16. OTHER INFORMATION	

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

*In good health except for condition of colon.  
Had fissure removed from colon in March 1953 and  
some of same symptoms repeat as before operation.*

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE		
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	RELATION(S)
FATHER			<i>Cerebral Hemorrhage</i>	<i>51</i>			<i>None</i>
MOTHER	<i>70</i>	<i>good</i>					HAD TUBERCULOSIS
SPOUSE	<i>42</i>	<i>good</i>					HAD SYPHILIS
	<i>46</i>	<i>good</i>					HAD DIABETES
BROTHERS	<i>38</i>	<i>good</i>					HAD CANCER
AND	<i>36</i>	<i>good</i>					HAD KIDNEY TROUBLE
SISTERS							HAD HEART TROUBLE
							HAD STOMACH TROUBLE
							HAD RHEUMATISM (Arthritis)
CHILDREN							HAD ASTHMA, HAY FEVER, HIVES
							HAD EPILEPSY (Fits)
							COMMITTED SUICIDE
							BEEN INSANE

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
	<input checked="" type="checkbox"/>	SCARLET FEVER, ERYSIPELAS		<input checked="" type="checkbox"/>	GOITER		<input checked="" type="checkbox"/>	TUMOR, GROWTH, CYST, CANCER		<input checked="" type="checkbox"/>	"TRICK" OR LOCKED KNEE
	<input checked="" type="checkbox"/>	DIPHTHERIA		<input checked="" type="checkbox"/>	TUBERCULOSIS		<input checked="" type="checkbox"/>	RUPTURE		<input checked="" type="checkbox"/>	FOOT TROUBLE
	<input checked="" type="checkbox"/>	RHEUMATIC FEVER		<input checked="" type="checkbox"/>	SOAKING SWEATS (Night sweats)		<input checked="" type="checkbox"/>	APPENDICITIS		<input checked="" type="checkbox"/>	NEURITIS
	<input checked="" type="checkbox"/>	SWOLLEN OR PAINFUL JOINTS		<input checked="" type="checkbox"/>	ASTHMA		<input checked="" type="checkbox"/>	PILES OR RECTAL DISEASE		<input checked="" type="checkbox"/>	PARALYSIS (Inc. Infantile)
	<input checked="" type="checkbox"/>	MUMPS		<input checked="" type="checkbox"/>	SHORTNESS OF BREATH		<input checked="" type="checkbox"/>	FREQUENT OR PAINFUL URINATION		<input checked="" type="checkbox"/>	EPILEPSY OR FITS
	<input checked="" type="checkbox"/>	WHOOPING COUGH		<input checked="" type="checkbox"/>	PAIN OR PRESSURE IN CHEST		<input checked="" type="checkbox"/>	KIDNEY STONE OR BLOOD IN URINE		<input checked="" type="checkbox"/>	CAR, TRAIN, SEA, OR AIR SICKNESS
	<input checked="" type="checkbox"/>	FREQUENT OR SEVERE HEADACHE		<input checked="" type="checkbox"/>	CHRONIC COUGH		<input checked="" type="checkbox"/>	SUGAR OR ALBUMIN IN URINE		<input checked="" type="checkbox"/>	FREQUENT TROUBLE SLEEPING
	<input checked="" type="checkbox"/>	DIZZINESS OR FAINTING SPELLS		<input checked="" type="checkbox"/>	PALPITATION OR POUNDING HEART		<input checked="" type="checkbox"/>	BOILS		<input checked="" type="checkbox"/>	FREQUENT OR TERRIFYING NIGHTMARES
	<input checked="" type="checkbox"/>	EYE TROUBLE		<input checked="" type="checkbox"/>	HIGH OR LOW BLOOD PRESSURE		<input checked="" type="checkbox"/>	VENEREAL DISEASE		<input checked="" type="checkbox"/>	DEPRESSION OR EXCESSIVE WORRY
	<input checked="" type="checkbox"/>	EAR, NOSE OR THROAT TROUBLE		<input checked="" type="checkbox"/>	CRAMPS IN YOUR LEGS		<input checked="" type="checkbox"/>	RECENT GAIN OR LOSS OF WEIGHT		<input checked="" type="checkbox"/>	LOSS OF MEMORY OR ANGESIA
	<input checked="" type="checkbox"/>	RUNNING EARS		<input checked="" type="checkbox"/>	FREQUENT INDIGESTION		<input checked="" type="checkbox"/>	ARTHRITIS OR RHEUMATISM		<input checked="" type="checkbox"/>	BED WETTING
	<input checked="" type="checkbox"/>	CHRONIC OR FREQUENT COLDS		<input checked="" type="checkbox"/>	STOMACH, LIVER OR INTESTINAL TROUBLE		<input checked="" type="checkbox"/>	BONE, JOINT, OR OTHER DEFORMITY		<input checked="" type="checkbox"/>	NERVOUS TROUBLE OF ANY SORT
	<input checked="" type="checkbox"/>	SEVERE TOOTH OR GUM TROUBLE		<input checked="" type="checkbox"/>	GALL BLADDER TROUBLE OR GALL STONES		<input checked="" type="checkbox"/>	LAMENESS		<input checked="" type="checkbox"/>	ANY DRUG OR NARCOTIC HABIT
	<input checked="" type="checkbox"/>	SINUSITIS		<input checked="" type="checkbox"/>	JAUNDICE		<input checked="" type="checkbox"/>	LOSS OF ARM, LEG, FINGER, OR TOE		<input checked="" type="checkbox"/>	EXCESSIVE DRINKING HABIT
	<input checked="" type="checkbox"/>	HAY FEVER		<input checked="" type="checkbox"/>	ANY REACTION TO SERUM, DRUG OR MEDICINE		<input checked="" type="checkbox"/>	PAINFUL OR "TRICK" SHOULDER OR ELBOW		<input checked="" type="checkbox"/>	HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/> WORN GLASSES	<input checked="" type="checkbox"/> ATTEMPTED SUICIDE	<input checked="" type="checkbox"/> BEEN PREGNANT	AGE AT ONSET OF MENSTRUATION
<input checked="" type="checkbox"/> WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/> BEEN A SLEEP WALKER	<input checked="" type="checkbox"/> HAD A VAGINAL DISCHARGE	INTERVAL BETWEEN PERIODS
<input checked="" type="checkbox"/> WORN HEARING AIDS	<input checked="" type="checkbox"/> LIVED WITH ANYONE WHO HAD TUBERCULOSIS	<input checked="" type="checkbox"/> BEEN TREATED FOR A FEMALE DISORDER	DURATION OF PERIODS
<input checked="" type="checkbox"/> STUTTERED OR STAMMERED	<input checked="" type="checkbox"/> COUGHED UP BLOOD	<input checked="" type="checkbox"/> HAD PAINFUL MENSTRUATION	DATE OF LAST PERIOD
<input checked="" type="checkbox"/> WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/> ATE EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION	<input checked="" type="checkbox"/> HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS

25. WHAT IS YOUR USUAL OCCUPATION?

26. ARE YOU (Check one)

☐ RIGHT HANDED ☐ LEFT HANDED

ENCLOSURE

67-99243-161

10-68280-1

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
<input checked="" type="checkbox"/>	<input type="checkbox"/>	17. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC. B. INABILITY TO PERFORM CERTAIN MOTIONS C. INABILITY TO ASSUME CERTAIN POSITIONS D. OTHER MEDICAL REASONS (If yes, give reasons)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	18. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	19. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	20. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	21. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	23. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

Tonah 1938  
Furnace per Colon 1953

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

SIGNATURE

*Human O. Bly*

30. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 29)

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

SIGNATURE

*P. W. D. D. D.*

NUMBER OF ATTACHED SHEETS

ATTACHMENT TO STANDARD FORM 88  
(Revised July 21, 1952)

Report of Medical Examination

FOR INFORMATION AND GUIDANCE OF MEDICAL EXAMINER:

The following portions of the attached examination report form need not be completed:

2	67
3	68
11	69
14	71 (unless other
17	examination indi-
62	cates desirable)
65	72

Item 48, the electrocardiogram, is not required unless the examinee is over 35 years of age or unless other examination indicates such is desirable.

If the examinee is an applicant, the Chest X ray and blood type and Rh factor (Items 46 and 49) are not necessary unless the facilities for affording same are readily available to the examiner.

FOR ALL EXAMINEES, WHETHER CLERICAL OR SPECIAL AGENT APPLICANTS OR EMPLOYEES:

The medical examiner should answer the following question:

Examinee 15 qualified for strenuous physical  
(is or is not)  
exertion. (Designate which)

FOR ALL MALE EMPLOYEES OR APPLICANTS:

The medical examiner is requested to answer the following:

Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

no  
If answer is "yes" please specify.

IT IS ESSENTIAL THAT ALL STATEMENTS IN ITEMS 59, 61, 64 AND 70 PERTAINING TO VISUAL ACUITY, COLOR VISION AND HEARING BE COMPLETED IN DETAIL.

R. W. Hunter  
(Signature of Medical Examiner)

2/18/54  
(Date)

ENCLOSURE

67-99243-161

1. Agency and organizational designations U.S. Department of Justice Federal Bureau of Investigation		2. Pay roll	3. Block No.	4. Slip No. <b>11524</b>						
5. Employee's name (and social security account number when appropriate) <b>MR. HERMAN A. HYS</b>		6. Grade and salary <b>SA GS 14 \$5800</b>								
PAY ROLL CHANGE DATA										
	BASE PAY	OVERTIME		GROSS PAY	RET.	TAX.....	BOND	F. I. C. A.		NET PAY
7. Previous normal										
8. New normal										
9. Pay this period										
10. Remarks:						11. Appropriation(s)		12. Prepared by <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>18</b>          Audited by       </div>		
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Periodic step-increase              <input type="checkbox"/> Pay adjustment              <input type="checkbox"/> Other step-increase.....         </div> <div>           14. Effective date  <b>1-17-54</b> </div> <div>           15. Date last equivalent increase  <b>7-20-53</b> </div> <div>           16. Old salary rate  <b>\$4800</b> </div> <div>           17. New salary rate  <b>\$5800</b> </div> <div>           18. Performance rating is satisfactory or better.  <div style="border-top: 1px solid black; width: 100%;"></div>           (Signature or other authentication)         </div> </div>										
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods): Period(s): <input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP						(Check applicable box in case of excess LWOP) <input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.				
STANDARD FORM NO. 1126d—Revised Form prescribed by Comp. Gen., U. S. Nov. 8, 1950, General Regulations No. 102						PAY ROLL CHANGE SLIP—PERSONNEL COPY <div style="text-align: right;">           Initials of Clerk  <b>THM</b> </div>				

May 21, 1954

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

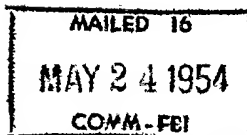
I have had the opportunity of reading the transcript of your presentation to the National Executive Committee meeting of the American Legion in Indianapolis, and I did want to take this opportunity to tell you what a fine job I thought you did in discussing the menace of Communism.

After reading your remarks, I can understand very well why they were so well received. I did want to commend you for the fine job that you did.

With best wishes and kind regards,

Sincerely yours,

J. Edgar Hoover



Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Morgan \_\_\_\_\_  
Glavin \_\_\_\_\_  
Harbo \_\_\_\_\_  
Rosen \_\_\_\_\_

LBN:arm

JUN 2 1954

MAY 25 1954  
132  
MAY 21 10 08 PM '54  
U. S. DEPT. OF JUSTICE  
RECEIVED DIRECTOR

RECEIVED  
MAY 21 6 17 PM '54  
166

November 22, 1954

Personal and ~~Confidential~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I feel your splendid services in connection with the several regional conferences, which were recently conducted, relating to the development of security informants, deserve special recognition.

It is apparent these conferences were efficiently organized and considerable thought and attention were given to the preparation of material. It is a pleasure to express to you my appreciation and commendation for your contribution to the success of this endeavor.

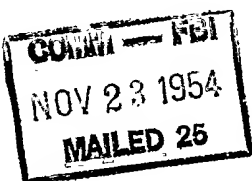
Sincerely yours,

cc: Mr. Belmont (Personal Attention)

LHH:ilw  
67-99248  
(4)

Tolson \_\_\_\_\_  
Boardman \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Harbo \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
 Sizoo \_\_\_\_\_  
Winterrowd \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

55 DEC 23 1954



67-99248-168

RECEIVED  
NOV 23 10 10 AM '54



# REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>BLY, HERMAN O.</b>		2. GRADE AND COMPONENT OR POSITION <b>SA</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>	6. DATE OF EXAMINATION <b>2-8-55</b>
7. SEX <b>M</b>	8. RACE <b>White</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7-12-13</b>	
13. PLACE OF BIRTH <b>Virginia</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>Bethesda</b>		16. OTHER INFORMATION	

17. RATING OR SPECIALTY	TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
-------------------------	------------------------------	-----------------

CLINICAL EVALUATION		NOTES—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)
NORMAL	ABNORMAL	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP
<input checked="" type="checkbox"/>	<input type="checkbox"/>	19. NOSE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	20. SINUSES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	21. MOUTH AND THROAT
<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. EARS—GENERAL (Int. & ext. canals) (Audiometry results under items 70 and 71)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	23. DRUMS (Perforation)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 68, 69, and 71)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. OPHTHALMOSCOPIC
<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. PUPILS (Equality and reaction)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. OCULAR MOTILITY (Accommodated parallel movements, nystagmus)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate if indicated)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	33. ENDOCRINE SYSTEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	34. G-U SYSTEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	36. FEET
<input checked="" type="checkbox"/>	<input type="checkbox"/>	37. LOWER EXTREMITIES (Excerpt feet) (Strength, range of motion)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL
<input checked="" type="checkbox"/>	<input type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	40. SKIN, LYMPHATICS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	41. NEUROLOGIC (Equilibrium tests under item 70)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviation)
Females only (Check how done)		
43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL		

Resolving pneumonitis lower rt. lung

Anal fissure scar.

V.S. - left arm.

Pic. nevi - post. thorax & post. neck

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES
O.—Restorable teeth X.—Missing teeth (X X X)—Replaced by dentures (X X X)—Fixed bridge, brackets in appliances		
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16		Type III Class 1 99243-169
17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32		
LABORATORY FINDINGS		47. SEROLOGY (Specify test used and result)
45. URINALYSIS: SP. GR. 1.020		Kahn, Negative
ALBUMIN SUGAR MICROSCOPIC Neg. Neg. Ker.		46. CHEST X-RAY (Place, date, film number, result) Negative
48. EKG Normal		49. BLOOD TYPE AND RH FACTOR
50. OTHER TESTS		FEDERAL BUREAU OF INVESTIGATION

25  
FEB 24 1955

FEB 1 8 43

MEASUREMENTS AND OTHER FINDINGS											
81. HEIGHT	70 1/2	82. WEIGHT	159	83. COLOR HAIR	BROWN	84. COLOR EYES	blue	85. BUILD:	SLIMMER <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> HEAVY <input type="checkbox"/> OBESE <input type="checkbox"/>	86. TEMP.	
87. BLOOD PRESSURE (Arms at heart level)						88. PULSE (Arms at heart level)					
SITTING	SYA 110	RECUM-BENT	SYA 110	STAND-ING	SYA 110	78	AFTER EXERCISE		1 MIN. AFTER	RECU-MBENT	AFTER STAND-ING 3 MIN.
DIA. 70		DIA. 70		DIA. 70							
89. DISTANT VISION				90. REFRACTION			91. NEAR VISION				
RIGHT M/	20	CORR. TO M/		BY	CK		CORR. TO		BY		
LEFT M/	20	CORR. TO M/		BY	CK		CORR. TO		BY		
92. METEOROPHORIA: (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD											
93. ACCOMMODATION		94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)		UNCORRECTED			
RIGHT	LEFT	AOC-10-Normal						CORRECTED			
96. FIELD OF VISION		97. NIGHT VISION (Test used and score)				98. RED LENS		99. INTRAOCULAR TENSION			
70. HEARING		71. AUDIOMETER					72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)				
RIGHT WV	15 7/8 SV 15 1/8		300 800	500 810	1000 1000	2000 2000	4000 4000	8000 8100			
LEFT WV	15 7/8 SV 15 1/8										
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY											

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)						76. PHYSICAL PROFILE					
						P	U	L	H	E	S
77. EXAMINEE (Check)						PHYSICAL CATEGORY					
<input checked="" type="checkbox"/> IS QUALIFIED FOR strenuous phys. exertion & use of firearms. <input type="checkbox"/> IS NOT											
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						A	B	C	E		
79. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
						/S/ N. P. Aspen					
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate specialty)						SIGNATURE					
						/S/ A. T. Smith					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPELLING AGENCY						SIGNATURE					
						NUMBER OF ATTACHED SHEETS					

ATTACHMENT TO STANDARD FORM 88  
(Revised July 21, 1952)

Report of Medical Examination

FOR INFORMATION AND GUIDANCE OF MEDICAL EXAMINER:

The following portions of the attached examination report form need not be completed:

2	67
3	68
11	69
14	71 (unless other
17	examination indi-
62	cates desirable)
65	72

Item 48, the electrocardiogram, is not required unless the examinee is over 35 years of age or unless other examination indicates such is desirable.

If the examinee is an applicant, the Chest X ray and blood type and Rh factor (Items 46 and 49) are not necessary unless the facilities for affording same are readily available to the examiner.

FOR ALL EXAMINEES, WHETHER CLERICAL OR SPECIAL AGENT APPLICANTS OR EMPLOYEES:

The medical examiner should answer the following question:

Examinee do qualified for strenuous physical  
(is or ~~is not~~)  
exertion. (Designate which)

FOR ALL MALE EMPLOYEES OR APPLICANTS:

The medical examiner is requested to answer the following:

Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

No  
If answer is "yes" please specify.

IT IS ESSENTIAL THAT ALL STATEMENTS IN ITEMS 59, 61, 64 AND 70 PERTAINING TO VISUAL ACUITY, COLOR VISION AND HEARING BE COMPLETED IN DETAIL.

25  
ENCLOSURE

H. C. Cooper  
(Signature of Medical Examiner)

14 Feb 55  
(Date)

67-99443-169

1. Agency and organizational designation U.S. Department of Justice Federal Bureau of Investigation		2. Pay roll	3. Block No.	4. Slip No. 3077				
5. Employee's name (and Social Security account number when appropriate) HERMAN O. REX 12181 REX SA		6. Grade and salary GS 14, \$20,200						
PAY ROLL CHANGE DATA								
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX.....	BOND	F. I. C. A.	NET PAY
7. Previous normal								
8. New normal								
9. Pay this period								
10. Remarks:						11. Appropriation(s) <div style="font-size: 2em; text-align: center;">41</div>		12. Prepared by <div style="font-size: 1.5em; text-align: center;">J. J. [Signature]</div>
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase.....						13. Approval <div style="font-size: 1.5em; text-align: center;">J. J. [Signature]</div>		
14. Effective date 7-27-55	15. Date last equivalent increase 2-17-54	16. Old salary rate \$20,000	17. New salary rate \$20,200	18. Performance rating is satisfactory or better. <div style="font-size: 1.5em; text-align: center;">[Signature]</div>				
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods): Period(s):				(Check applicable box in case of excess LWOP) <input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.				
<input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP.....				Initials of Clerk				

STANDARD FORM NO. 1136-Rev'd  
 Form prescribed by Comp. Gen., U. S.  
 Nov. 2, 1950, General Regulations No. 102

41 JUN 29 1955

JULI CHANGE SLIP-PERSONNEL COPY

84

RT OF MEDICAL EXAMINATI

1. NAME—FIRST NAME—MIDDLE NAME <b>W. L. HERMAN O.</b>		2. GRADE AND COMPONENT OR POSITION <b>SA (Supervisor)</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>Annual</b>	6. DATE OF EXAMINATION <b>1-30-56</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT			
12. DATE OF BIRTH <b>7-12-13</b>	13. PLACE OF BIRTH <b>Virginia</b>	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>N.N.M.C.</b>		16. OTHER INFORMATION	

17. RATING OR SPECIALTY		TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
<b>CLINICAL EVALUATION</b>		<b>NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)</b>	
NORMAL	ABNOR- MAL	(Check each item in appropriate column: enter "N. B." if not evaluated)	
<b>X</b>		18. HEAD, FACE, NECK, AND SCALP	
<b>X</b>		19. NOSE	
<b>X</b>		20. SINUSES	
<b>X</b>		21. MOUTH AND THROAT	
<b>X</b>		22. EARS—GENERAL (Int. & ext. ossicles) (Auditory acuity under items 20 and 21)	
<b>X</b>		23. DRUMS (Perforation)	
<b>X</b>		24. EYES—GENERAL (Visual acuity and refraction under items 25, 26, and 27)	
<b>no</b>		25. OPHTHALMOSCOPIC	
<b>X</b>		26. PUPILS (Equality and reaction)	
<b>X</b>		27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
<b>X</b>		28. LUNGS AND CHEST (Include breaths)	
<b>X</b>		29. HEART (Thrust, size, rhythm, sounds)	
<b>X</b>		30. VASCULAR SYSTEM (Varicosities, etc.)	
<b>X</b>		31. ABDOMEN AND VISCERA (Include hernia)	
<b>X</b>		32. ANUS AND RECTUM (Hemorrhoids, fistula) (Prostate if indicated)	
<b>X</b>		33. ENDOCRINE SYSTEM	
<b>X</b>		34. G-U SYSTEM	
<b>X</b>		35. UPPER EXTREMITIES (Strength, range of motion)	
<b>X</b>		36. FEET	
<b>X</b>		37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
<b>X</b>		38. SPINE, OTHER MUSCULOSKELETAL	
		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
<b>X</b>		40. SKIN, LYMPHATICS	
<b>X</b>		41. NEUROLOGIC (Equilibrium tests under item 28)	
<b>X</b>		42. PSYCHIATRIC (Specify any personality deviation)	
Females only		(Check how done)	
		43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES <b>Slight calculus</b> <b>99242-174</b>
O.—Restorable teeth X.—Missing teeth (X X X)—Fixed bridge, brackets to include abutments (—Nonrestorable teeth XXX.—Replaced by dentures)		
R 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	L 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	

45. URINALYSIS: SP. GR. <b>1.009</b>		46. CHEST X-RAY (Place, date, film number, result) <b>Negative 46325</b>	47. SEROLOGY (Specify test used and result) <b>Kahn Negative (1955)</b>
ALBUMIN <b>Neg</b>	SUGAR <b>Neg</b>	50. OTHER TESTS	FEU...
Normal			

23

MEASUREMENTS AND OTHER FINDINGS																																			
51. HEIGHT 69		52. WEIGHT 153		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BLOOD: <input checked="" type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBES		56. TEMP.																									
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)																													
SITTING SYS. 112 DIAS. 72		RECUM. BENT SYS. DIAS.		STANDING (5 min.) SYS. DIAS.		SITTING 76		AFTER EXERCISE 13 3:04 PM '56		2 MIN. AFTER 36																									
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION																											
RIGHT 20/20 CORR. TO 20/				BY S. CX				0.62M CORR. TO BY																											
LEFT 20/20 CORR. TO 20/				BY S. CX				0.62M CORR. TO BY																											
62. METEOPHORIA: (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD																																			
63. ACCOMMODATION RIGHT LEFT				64. COLOR VISION (Test used and result) ACC 19/10 18/18				65. DEPTH PERCEPTION (Test used and score) UNCORRECTED CORRECTED																											
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS 69. INTRACULAR TENSION																											
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)																											
RIGHT WV 7/15 SV /15 LEFT WV 15 /15 SV 15 /15		<table border="1"> <tr> <td>250 Hz</td> <td>500 Hz</td> <td>1000 Hz</td> <td>2000 Hz</td> <td>3000 Hz</td> <td>4000 Hz</td> <td>5000 Hz</td> <td>6000 Hz</td> </tr> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						250 Hz	500 Hz	1000 Hz	2000 Hz	3000 Hz	4000 Hz	5000 Hz	6000 Hz	RIGHT								LEFT											
250 Hz	500 Hz	1000 Hz	2000 Hz	3000 Hz	4000 Hz	5000 Hz	6000 Hz																												
RIGHT																																			
LEFT																																			
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY																																			

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. EXAMINEE (Check)

☒ IS  
☐ IS NOT

QUALIFIED FOR: strenuous physical exertion and use of firearms.

76. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

77. TYPED OR PRINTED NAME OF PHYSICIAN

G. R. JOHNSTON, CAPT, MC, USN

78. TYPED OR PRINTED NAME OF PHYSICIAN

79. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

80. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

/s/ G. R. Johnston

SIGNATURE

SIGNATURE

/s/ A. T. Smith

SIGNATURE

76. PHYSICAL PROFILE

P	U	L	H	E	S

PHYSICAL CATEGORY

A	B	C	E

NUMBER OF ATTACHED SHEETS

ATTACHMENT TO STANDARD FORM 88  
(Revised July 21, 1952)

Report of Medical Examination

FOR INFORMATION AND GUIDANCE OF MEDICAL EXAMINER:

The following portions of the attached examination report form need not be completed:

2	67
3	68
11	69
14	71 (unless other
17	examination indi-
62	cates desirable)
65	72

Item 48, the electrocardiogram, is not required unless the examinee is over 35 years of age or unless other examination indicates such is desirable.

If the examinee is an applicant, the Chest X ray and blood type and Rh factor (Items 46 and 49) are not necessary unless the facilities for affording same are readily available to the examiner.

FOR ALL EXAMINEES, WHETHER CLERICAL OR SPECIAL AGENT APPLICANTS OR EMPLOYEES:

The medical examiner should answer the following question:

Examinee is qualified for strenuous physical  
(is or is not)  
exertion. (Designate which)

FOR ALL MALE EMPLOYEES OR APPLICANTS:

The medical examiner is requested to answer the following:

Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

27 No  
If answer is "yes" please specify.

IT IS ESSENTIAL THAT ALL STATEMENTS IN ITEMS 59, 61, 64 AND 70 PERTAINING TO VISUAL ACUITY, COLOR VISION AND HEARING BE COMPLETED IN DETAIL.

B. R. Johnston  
(Signature of Medical Examiner)

FEB 7 1956

(Date)

B.L.V. H.O.

67-99243-154

June 19, 1956

Personal and ~~Confidential~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am writing at this time to commend you for your excellent supervision of the case involving the United Labor and Peoples Committee for May Day during the early phases of the investigation.

The successful results achieved in this difficult case can be attributed, in part, to the effective and constructive assistance you gave the field at the outset of the case. I want you to know I am most appreciative of your efforts.

Sincerely yours,

CC: Mr. Belmont (Personal Attention)

LRH:js  
67-99243

(4)

Based on memo Baumgardner to Belmont 6/6/56 JHK:dlj &  
Addendum of Administrative Division 6/13/56 CRD:hlb.

Tolson \_\_\_\_\_  
Nichols \_\_\_\_\_  
Boardman \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mason \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Nease \_\_\_\_\_  
Winterrowd \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_



# REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME (Type or Print) <b>Ely, Herman O.</b>		2. GRADE AND COMPONENT OR POSITION <b>SA</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, state and State)		5. PURPOSE OF EXAMINATION <b>Annual</b>	6. DATE OF EXAMINATION <b>1-30-57</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7-12-13</b>	
13. PLACE OF BIRTH <b>Virginia</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>Bethesda</b>		16. OTHER INFORMATION	

17. RATING OR SPECIALTY	TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
-------------------------	------------------------------	-----------------

CLINICAL EVALUATION	
NORMAL	ABNORMAL
	(Check each item in appropriate column; enter "N.E." if not evaluated)
	18. HEAD, FACE, NECK, AND SCALP
	19. NOSE
	20. SINUSES
	21. MOUTH AND THROAT
	22. EARS—GENERAL (Vis. & aud. acuity) (Auditory acuity under items 70 and 71)
	23. DRUMS (Perforation)
	24. EYES—GENERAL (Visual acuity and refraction under items 68, 69, and 71)
	25. OPHTHALMOSCOPIC
	26. PUPILS (Equality and reaction)
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
	28. LUNGS AND CHEST (Include breasts)
	29. HEART (Thrust, size, rhythm, sounds)
	30. VASCULAR SYSTEM (Varicosities, etc.)
	31. ABDOMEN AND VISCERA (Include hernia)
	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate if indicated)
	33. ENDOCRINE SYSTEM
	34. G-U SYSTEM
	35. UPPER EXTREMITIES (Strength, range of motion)
	36. FEET
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)
	38. SPINE, OTHER MUSCULOSKELETAL
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
	40. SKIN, LYMPHATICS
	41. NEUROLOGIC (Equilibrium tests under item 70)
	42. PSYCHIATRIC (Specify any personality deviation)
Females only (Check how done)	
	43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

Some redness in anal area

Warts on trunk, back, perineum and in hair line

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES																																																
O.—Restorable tooth	X.—Missing tooth	Meets dental standards																																																
1.—Nonrestorable tooth	XXX.—Replaced by dentures																																																	
(If X O).—Fixed bridge, brackets to include abutments																																																		
<table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td> </tr> </table>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16																	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	99 243-177
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16																																			
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32																																			

LABORATORY FINDINGS		
45. URINALYSIS: SP. GR. <b>1.018</b>	46. CHEST X-RAY (Place, date, film number, result)	47. SEROLOGY (Specify test used and result)
ALBUMIN <b>Neg.</b>	<b>Negative 48519</b>	<b>Kahn, Negative</b>
SUGAR <b>Neg.</b>		
MICROSCOPIC <b>Neg.</b>		
48. EKG <b>Normal</b>	49. BLOOD TYPE AND RH FACTOR <b>143</b>	50. OTHER TESTS

MAR 6

MEASUREMENTS AND OTHER FINDINGS									
51. HEIGHT 70	52. WEIGHT 158	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: <input type="checkbox"/> SLENDER <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE	56. TEMP.				
57. BLOOD PRESSURE (Arm at heart level)					58. PULSE (Arm at heart level)				
SITTING SYS. 101 DIA. 61	RECU- BENT SYS. DIA.	STANDING SYS. DIA.	STANDING SYS. DIA.	AFTER EXERCISE 1 MIN. AFTER	RECU- BENT AFTER STANDING 3 MIN.				
59. DISTANT VISION		60. REFRACTION		61. 0.62m NEAR VISION					
RIGHT 20	CORR. TO 20	BY	S.	CX	20.8	CORR. TO	BY		
LEFT 20	CORR. TO 20	BY	S.	CX	20.7	CORR. TO	BY		
62. METROPHORIA: (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD									
63. ACCOMMODATION RIGHT LEFT		64. COLOR VISION (Test used and result) AOC 19/10 18/18		65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED CORRECTED			
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)		68. RED LENS		69. INTRAOCULAR TENSION			
70. HEARING		71. AUDIOMETER				72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)			
RIGHT WV 15 7/16 SV 15 7/16	LEFT WV 15 7/16 SV 15 7/16	RIGHT	LEFT	500 500	600 610	1000 1000	2000 2000	4000 4000	8000 8100
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY									

(Use additional sheets of plain paper if necessary)

## 74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

32. Dermatitis peri anal - RS vioform,  
40. Verruca

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)		76. PHYSICAL PROFILE					
Dermatology 2-20-57		P	U	L	H	E	S
77. EXAMINEE (Check) <input checked="" type="checkbox"/> IS QUALIFIED FOR <input type="checkbox"/> IS NOT QUALIFIED FOR		PHYSICAL CATEGORY					
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER		A	B	C	E		
79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE					
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE					
		NUMBER OF AT- TACHED SHEETS					

CLINICAL RECORD

CONSULTATION SHEET

TO : DERMATOLOGY

FROM: STAFF CLINIC

DATE: 1-30-57

REASON: C.C. Warts

Agent revealed moderate sized warts on head, back, and perineum, and some small ones on trunk.

Please examine and advise.

CONSULTATION REPORT

Multiple Soft fibroma of skin. Are removed from back, perineum, and neck.

/s/ J. W. Albright

PATIENT'S IDENTIFICATION

WARD

BLY, Herman O.

FBI

Staff Clinic

21

ENCLOSURE 67-99243-177

ATTACHMENT TO STANDARD FORM 88  
(Revised July 25, 1956)

Report of Medical Examination

FOR INFORMATION AND GUIDANCE OF MEDICAL EXAMINER:

The following portions of the attached examination report form need not be completed:

2	67
3	68
11	69
14	71 (Item 71, audiometer examinations, should be afforded whenever possible.)
17	
62	
65	72

Item 48, the electrocardiogram, is not required unless the examinee is over 35 years of age or unless other examination indicates such is desirable.

If the examinee is an applicant, the Chest X-ray and blood type and Rh factor (Items 46 and 49) are not necessary unless the facilities for affording same are readily available to the examiner.

FOR ALL EXAMINEES, WHETHER CLERICAL OR SPECIAL AGENT APPLICANTS OR EMPLOYEES:

The medical examiner should answer the following question:

Examinee is qualified for strenuous physical exertion. (Designate which)  
(is or is not)

FOR ALL MALE EMPLOYEES OR APPLICANTS:

The medical examiner is requested to answer the following:

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms? ☐ Yes ☒ No

2. Does examinee have any defects prohibiting safe operation of motor vehicles?  
☐ Yes ☒ No

If answer is "yes" please specify.

IT IS ESSENTIAL THAT ALL STATEMENTS IN ITEMS 59, 61, 64 AND 70 PERTAINING TO VISUAL ACUITY, COLOR VISION AND HEARING BE COMPLETED IN DETAIL.

21

A. R. Johnston

(Signature of Medical Examiner)

FEB 20 1957

(Date)

B.L.Y. H. O.

67-99243-77

1. Agency and organizational designation <b>Federal Bureau of Investigation</b>		2. Position <b>SA</b>		3. Block No. <b>14393</b>		4. Slip No. <b>14393</b>	
5. Employee's name (and social security number) <b>MR. HERMAN O. BLY</b>		6. (has appropriate)		7. Gross Pay <b>\$11,180</b>		8. Net Pay <b>\$11,180</b>	
9. Pay this period		10. Remarks		11. Appropriation(s)		12. Prepared by	
13. Audited by		14. Effective date		15. Date last equivalent increase		16. Old salary rate	
17. New salary rate		18. Performance rating is satisfactory or better:		19. LWOP data (Fill in appropriate spaces covering LWOP period(s))		20. No excess LWOP. Total excess LWOP	
21. STANDARD FORM NO. 1126d—Revised Form prescribed by Comp. Gen., U. S. Nov. 6, 1950, General Regulations No. 102		22. PAYROLL CHANGE SLIP—PERSONNEL COPY		23. U. S. GOVERNMENT PRINTING OFFICE 1951-246171		24. 3/24	

November 8, 1957

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

The enthusiastic and able assistance rendered by you in the preparation of a manuscript on communism in the United States is certainly gratifying to note.

I am particularly aware of the many worthwhile suggestions you made, the research material you provided and the help you extended in reading the entire manuscript. Your performance is surely deserving of commendation.

Sincerely yours,

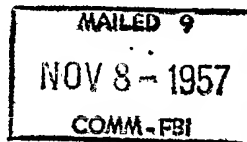
J. Edgar Hoover

1 - Mr. Belmont (Personal Attention)

CRD:jdm  
(4)  
67-99243

Tolson \_\_\_\_\_  
Nichols \_\_\_\_\_  
Boardman \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
Nease \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐



NOV 8 2 06 PM '57  
REC'D-READING ROOM  
FBI

January 14, 1958

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I do not want the opportunity to pass without commending you for your splendid over-all supervision of the preparation of a pamphlet to be utilized in a phase of our security operations.

The caution and intelligence demanded in handling a matter of this nature are apparent and the helpful suggestions and contributions you made throughout the preparation of this pamphlet were noteworthy. I am most appreciative of your highly capable services.

Sincerely yours,  
J. Edgar Hoover

JAN 14 4 57 PM '58  
REC'D-READING ROOM  
FBI

1 - Mr. Belmont (PERSONAL ATTENTION) Re preparation of pamphlet to be used in anonymous mailing phase of Bureau's counterintelligence program.

LRH:hmd  
(4)  
67-99243

Olson \_\_\_\_\_  
Nichols \_\_\_\_\_  
Boardman \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
Wase \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐

# REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME (Type or print) <u>O'Leary, Herman Olin</u>		2. GRADE AND COMPONENT OR POSITION <u>Special Agent, Supervisor</u>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <u>Annual</u>	6. DATE OF EXAMINATION <u>Dec. 20, 1957</u>
7. SEX <u>M</u>	8. RACE <u>W</u>	9. TOTAL YRS. GOVT. SERVICE MILITARY <input type="checkbox"/> CIVILIAN <input type="checkbox"/>	10. DEPARTMENT, AGENCY, OR SERVICE
11. ORGANIZATION UNIT			
12. DATE OF BIRTH <u>7-12-13</u>	13. PLACE OF BIRTH <u>Virginia</u>	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <u>N.H.C.</u>		16. OTHER INFORMATION	

17. RATING OR SPECIALTY		TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
<b>CLINICAL EVALUATION</b>		<b>NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)</b>	
NORMAL	ABNORMAL (Check each item in appropriate column: enter "N. E." if not evaluated)		
	18. HEAD, FACE, NECK, AND SCALP		
	19. NOSE		
	20. SINUSES		
	21. MOUTH AND THROAT		
	22. EARS—GENERAL (Int. & ext. canals) (Audiology results under items 70 and 71)		
	23. DRUMS (Perforation)		
	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26, and 27)		
<u>NE</u>	25. OPHTHALMOSCOPIC		
	26. PUPILS (Equality and reaction)		
	27. OCULAR MOTILITY (Isolated parallel movements; nystagmus)		
	28. LUNGS AND CHEST (Include breaths)		
	29. HEART (Thrust, size, rhythm, sounds)		
	30. VASCULAR SYSTEM (Varicose veins, etc.)		
	31. ABDOMEN AND VISCERA (Include hernia)		
	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate if indicated)		
	33. ENDOCRINE SYSTEM		
	34. G-U SYSTEM		
	35. UPPER EXTREMITIES (Strength, range of motion)		
	36. FEET		
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)		
	38. SPINE, OTHER MUSCULOSKELETAL		
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS		
<u>X</u>	40. SKIN, LYMPHATICS	<u>Numerous seed marks</u>	
	41. NEUROLOGIC (Equilibrium tests under item 72)	<u>130 at.</u>	
	42. PSYCHIATRIC (Specify any personality deviation)	<u>99 243-184</u>	
Females only (Check how done)		<u>142</u>	
	43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	(Continue in item 73)	

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES  <u>Qualified</u>																																																					
O.—Restorable teeth      X.—Missing teeth      (X X X)—Fixed bridge, brackets to include abutments I.—Nonrestorable teeth      XXX.—Replaced by denture																																																							
<table border="1"><tr><td>R</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>X</td><td>L</td></tr><tr><td>X</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>I</td><td>31</td><td>30</td><td>29</td><td>28</td><td>27</td><td>26</td><td>25</td><td>24</td><td>23</td><td>22</td><td>21</td><td>20</td><td>19</td><td>18</td><td>17</td><td></td><td>T</td></tr></table>			R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	X	L	X																		I	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	X	L																																						
X																																																							
I	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17		T																																						

45. URINALYSIS: SP. GR.			46. CHEST X-RAY (Place, date, film number, result)	47. SEROLOGY (Specify test used and result)
ALBUMIN <u>Neg.</u>	SUGAR <u>Neg.</u>	MICROSCOPIC <u>1.010</u>	<u>050922C Negative</u>	<u>Negative</u>
48. EKG <u>within normal limits</u>		49. BLOOD TYPE AND RH FACTOR <u>78</u>	50. OTHER TESTS <u>see report</u>	

20 MAR 10 1958



MEASUREMENTS AND OTHER FINDINGS											
51. HEIGHT 70		52. WEIGHT 156		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE <input type="checkbox"/>		56. TEMP. 99	
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)					
SITTING SYS. 102 DIAS. 72		RECUM- BENT SYS. DIAS.		STANDING (3 min.) SYS. DIAS.		SITTING 84		AFTER EXERCISE		2 MIN. AFTER RECUMBENT AFTER STANDING 3 MIN.	
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION			
RIGHT 20 CORR. TO 20/				BY S. CX				20-6 CORR. TO BY			
LEFT 25 CORR. TO 20/				BY S. CX				20-6 CORR. TO BY			
62. METEOPHORIA (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD											
63. ACCOMMODATION RIGHT LEFT		64. COLOR VISION (Test used and result) 1946 AOC 18 X 18				65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED CORRECTED			
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)				68. RED LENS		69. INTRAOCULAR TENSION			
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT WV 7/15 SV 7/15		250 500 1000 2000 3000 4000 8000 850 1700 3400 6800 13600 27200									
LEFT WV 15 15 SV 15 15		RIGHT LEFT									

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

History of gas in bowel at nite has to arise to get rid of it.

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

40. Seedwart -oleum ricini

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)					76. PHYSICAL PROFILE				
Proctology. B. E. Strenuous Physical Exertion and use of Firearms					P U L H E S				
77. EXAMINEE (Check) <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT QUALIFIED FOR					PHYSICAL CATEGORY				
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER					A B C E				
79. TYPED OR PRINTED NAME OF PHYSICIAN G. R. JOHNSTON, CAPT. MC, USN					SIGNATURE S/ G. R. Johnston				
80. TYPED OR PRINTED NAME OF PHYSICIAN					SIGNATURE				
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)					SIGNATURE S/ J. B. Ferris				
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY					SIGNATURE				
					NUMBER OF ATTACHED SHEETS				

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME

BLY, Herman O. FBI

REGISTER NO.

OP

WARD NO.

T12

AGE

SEX

(Check one)

☐ BEDSIDE, WHEELCHAIR,  
OR STRETCHER

☐ BED  
PATIENT

☐ AMBULATORY

EXAMINATION REQUESTED

REQUESTED BY

Dr. Rice

DATE OF REQUEST

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

C O P Y

FILM NO.

4825-58

DATE OF REPORT

RADIOGRAPHIC REPORT

1/15/58 BARIUM ENEMA: The barium suspension flowed freely, filling the entire colon, cecum and terminal ileum. There was no hesitation or obstruction to the flow of the barium and no extrinsic or intrinsic filling defects were identified. Subsequent spot and follow-up films do not reveal any abnormalities. A postevacuation film does not reveal any abnormalities.

IMPRESSION: Normal colon, cecum, and terminal ileum. JCO/hcb

DEPARTMENT OF RADIOLOGY  
U.S. NAVAL HOSPITAL  
NATIONAL NAVAL MEDICAL CENTER  
BETHESDA 14, MARYLAND

J. G. O'LEARY  
LCDR MC USNR

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

GPO 40-10-50000-1

Standard Form 615A (Rev. Aug. 1964)  
Prescribed by Bureau of the Budget  
Circular A-55 (Rev.)

RADIOGRAPHIC REPORT

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

67-99 243-184

CLINICAL RECORDCONSULTATION SHEETTO: ProctologyFROM: Staff ClinicDATE: 20, Dec., 57REASON FOR REQUEST:

During annual physical examination this FBI Agent complained of gas in the bowels, which causes him to get up out of bed to pass the gas. This has appeared since he had a fissure removed 2-3-yrs. ago. At one time he has passed blood.

DOCTOR'S SIGNATURE:

S/ G. R. Johnston

PLACE OF CONSULTATION:

ON CALL

Routine

CONSULTATION REPORT

1-10-58 - Procto

Inspection - Healed scar from fissurectomy.

Digital - Negative

Sigmoidoscopy - Scope passed to 25 c ease. Mucoso naval to Nat level.

RECOMMEND\* Discontinuance of metamucil, Increase fluid intake, Barium enema.

Thank you,

S/ B. H. Rice LT (MC) (USN)

PATIENT'S IDENTIFICATION

Bly, Herman Olin

FBI

WARD NO.

Staff Clinic

67-99243-184

ATTACHMENT TO STANDARD FORM 88, REPORT OF MEDICAL EXAMINATION  
(Revised August 10, 1956)

FOR INFORMATION AND GUIDANCE OF MEDICAL EXAMINER

Name of examinee: BLY HERMAN OLIN  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	67
3	68
11	69
14	71 (Item 71, audiometer examinations, should be afforded whenever possible.)
17	
62	
65	72

Item 48, the electrocardiogram, is not required unless the examinee is over 35 years of age or unless other examination indicates such is desirable.

If the examinee is an applicant, the Chest X-ray and blood type and Rh factor (Items 46 and 49) are not necessary unless the facilities for affording same are readily available to the examiner.

FOR ALL EXAMINEES, WHETHER CLERICAL OR SPECIAL AGENT APPLICANTS OR EMPLOYEES:

The medical examiner should answer the following question:

Examinee is qualified for strenuous physical exertion. (Designate which)  
(is or is not)

FOR ALL MALE EMPLOYEES OR APPLICANTS:

The medical examiner is requested to answer the following:

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms? ☐ Yes ☒ No

20 2. Does examinee have any defects prohibiting safe operation of motor vehicles?  
☐ Yes ☒ No

If answer is "yes" please specify.

IT IS ESSENTIAL THAT ALL STATEMENTS IN ITEMS 59, 61, 64 AND 70 PERTAINING TO VISUAL ACUITY, COLOR VISION AND HEARING BE COMPLETED IN DETAIL.

G. R. Johnston  
(Signature of Medical Examiner)

FEB 26 1958  
(Date)

61-97245-184

# Office Memorandum • UNITED STATES GOVERNMENT

TO : DIRECTOR, FBI

DATE: February 19, 1958

FROM : A. H. BELMONT *AB*

SUBJECT: HERMAN G. BLY

## ATTITUDE

The purpose of this memorandum is to report that the captioned employee reported for work on 2-18-58, notwithstanding the extremely hazardous travel conditions. In accordance with the Director's instructions this is to be made a matter of record in the employee's personnel file and considered as a COMMENDATION.

On Saturday, 2-15-58, the Washington, D. C., area was blanketed by fourteen inches of snow as a result of a storm which the Weather Bureau termed the worst that has struck this area in twenty-two years. Thereafter, high winds and near zero temperatures set in for several days making travel conditions extremely hazardous.

On Monday, 2-17-58, in recognition of the hardships and hazards that Federal Government employees would face in coming to work, a White House announcement was made encouraging such employees to stay home and take a day of annual leave. During the late afternoon of 2-17-58, a further official announcement emanated from the White House instructing that all Government employees who were not considered essential would be excused from work on 2-18-58 on Administrative Leave.

The captioned employee considered his work and his services to the FBI so essential that in spite of the foregoing announcement he took it upon himself to come to work and perform his regularly assigned duties. This is considered a highly exemplary attitude on the part of this employee and his actions in this instance certainly demonstrate his devotion to duty and the fact that he places his employment with the FBI above his personal convenience.

## RECOMMENDATION:

That this memorandum be placed in the employee's personnel file.

1. Agency and organizational designations  
**F.F.I., U.S. Dept. of Justice**

2. Employee's name (and social security account number when appropriate)  
**12181 MR. H. PHAN O BLY**

3. Government Printing Office, 1952 - 997374

4. Pay roll

5. Block No.

6. Slip No.

7. Grade and salary

8. Gross pay

9. Net pay

10. Remarks

11. Base pay

12. Overtime

13. Gross pay

14. Ret.

15. Tax

16. Bond

17. F. I. C. A.

18. Appropriation(s)

19. Prepared by

20. Audited by

21. Periodic step-increase date

22. Date last increase

23. Pay adjustment

24. Other step-increase date

25. Gross pay

26. Net pay

27. LWOP data (Fill in appropriate spaces covering LWOP period(s))

28. No excess LWOP

29. Total excess LWOP

30. STANDARD FORM NO. 11264-REVISED

31. Issued by Comp. Gen., U. S. GPO

32. Nov. 8, 1950, General Regulation No. 102

33. PAY ROLL CHANGE SLIP—PERSONNEL COPY

34. Initials of Clerk

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME (Type or print) <u>Blv, Herman O.</u>				2. GRADE AND COMPONENT OR POSITION <u>SA</u>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)				5. PURPOSE OF EXAMINATION <u>annual physical</u>	6. DATE OF EXAMINATION <u>2-6-59</u>
7. SEX <u>M</u>	8. RACE <u>W</u>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT	
12. DATE OF BIRTH <u>7-12-13</u>		13. PLACE OF BIRTH <u>Virginia</u>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <u>N.N.H.C.</u>				16. OTHER INFORMATION	

17. RATING OR SPECIALTY		TIME IN THIS CAPACITY: TOTAL	LAST SIX MONTHS
CLINICAL EVALUATION		NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)	
NORMAL	ABNORMAL (Check each item in appropriate column; enter "N.E." if not evaluated)		
	18. HEAD, FACE, NECK, AND SCALP		
	19. NOSE		
	20. SINUSES		
	21. MOUTH AND THROAT		
	22. EARS—GENERAL (Int. & ext. organs) (Auditory acuity under items 70 and 71)		
	23. DRUMS (Perforation)		
	24. EYES—GENERAL (Visual acuity and refraction under items 68, 69, and 71)		
NE	25. OPHTHALMOSCOPIC		
	26. PUPILS (Equality and reaction)		
	27. OCULAR MOTILITY (Assess parallel movements, nystagmus)		
	28. LUNGS AND CHEST (Include breasts)		
	29. HEART (Thrust, size, rhythm, sounds)		
	30. VASCULAR SYSTEM (Varicosities, etc.)		
	31. ABDOMEN AND VISCERA (Include hernia)		
	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate if indicated)		
	33. ENDOCRINE SYSTEM		
	34. G-U SYSTEM		
	35. UPPER EXTREMITIES (Strength, range of motion)		
	36. FEET		
	37. LOWER EXTREMITIES (Kneel feet) (Strength, range of motion)		
2	38. SPINE, OTHER MUSCULOSKELETAL	tender over ilio psoas, left	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS		
	40. SKIN, LYMPHATICS		
	41. NEUROLOGIC (Reflexes, tests under item 70)		
	42. PSYCHIATRIC (Specify any personality deviation)		
Females only (Check how done)		ENCLOSURE	
	43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	(Continue in item 73)	

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES																																
O—Restorable tooth X—Missing tooth (if X O)—Fixed bridge, brackets to include abutments /—Nonrestorable tooth XXX—Replaced by dentures																																		
<table border="1"><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td></tr><tr><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td></tr></table>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	meets dental standards
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16																			
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32																			

45. URINALYSIS: SP. GR. <u>1.010</u>			46. CHEST X-RAY (Place, date, film number, result)	
ALBUMIN	SUGAR	MICROSCOPIC	052964C negative	
neg.	neg.	neg.	negative	
48. EKG		49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS	
within normal limits			audiogram—see report	

17 MAR 30 1959

MEASUREMENTS AND OTHER FINDINGS											
51. HEIGHT 70		52. WEIGHT 154		53. COLOR HAIR brown		54. COLOR EYES blue		55. BUILD: SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBSE <input type="checkbox"/>		56. TEMP. 98	
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)					
SITTING SYS. 118 DIAS. 72		RECUM. BENT SYS. DIAS. STANDING (3 min.) SYS. DIAS. 88		AFTER EXERCISE 1 MIN. AFTER 20-8		RECURRENT AFTER STANDING 3 MIN.					
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION			
RIGHT 20		CORR. TO 20		BY S. CX		20-8		CORR. TO		BY	
LEFT 20		CORR. TO 20		BY S. CX		20-10		CORR. TO		BY	
62. HETEROPHORIA: (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD											
63. ACCOMMODATION RIGHT LEFT				64. COLOR VISION (Test used and result) AOC 1946 normal				65. DEPTH PERCEPTION (Test used and score) UNCORRECTED CORRECTED			
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS		69. INTRAOCULAR TENSION	
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT 15 /15 SV /15		LEFT 15 /15 SV /15		RIGHT 0 0 0 0 0 0 0 0		LEFT 0 0 0 0 0 0 0 0		20 15		15 15	
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY											

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)  
 1. mephenesin T q 4 h x 3 to 5-then q 4 h #40  
 38. Myositis, left back 2. sodi sal T 2 h x 4-then T p c 4 h s.

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)						76. PHYSICAL PROFILE					
						P U L H E S					
77. EXAMINEE (Check) <input checked="" type="checkbox"/> IS QUALIFIED FOR <input type="checkbox"/> IS NOT						PHYSICAL CATEGORY					
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						A B C E					
79. TYPED OR PRINTED NAME OF PHYSICIAN G. R. JOHNSTON, CAPT, MC, USN						SIGNATURE S/ G. R. Johnston					
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)						SIGNATURE S/ J. B. Ferrie					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE					
						NUMBER OF ATTACHED SHEETS					



CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: **RAB CLINIC** FROM: (Requesting ward, unit, or activity) **STAFF CLINIC** DATE OF REQUEST **2-6-59**

REASON FOR REQUEST (Complaints and findings)

This FBI SA appeared this date for his annual physical examination and it was noted he has never been afforded an audiogram. Please do audiogram for record purposes.

Thank you,

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE *G.R. Johnston* APPROVED **G.R. JOHNSTON, CAPT. MC, USN** PLACE OF CONSULTATION ☐ BEDSIDE ☒ ON CALL ☐ EMERGENCY ☒ ROUTINE

CONSULTATION REPORT

2/6/59 - Very slight high tone hearing loss - no treatment indicated.  
Thank you,  
J. May C.

(Continued on reverse side)

17  
SIGNATURE AND TITLE DATE IDENTIFICATION NO. ORGANIZATION

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO. WARD NO. **Staff Clinic**

**BLY, HERMAN OLIN** *H.O.*

**SPECIAL AGENT, FBI**

CONSULTATION SHEET  
Standard Form 513

ENCLOSURE 7-17-1-197

67-99243-197

Weights for Males

Height Feet-Inches	SMALL FRAME		MEDIUM FRAME		LARGE FRAME	
	Desirable	Maximum	Desirable	Maximum	Desirable	Maximum
5 4	121-131	143	129-139	152	136-148	162
5 5	124-134	146	132-142	155	140-152	166
5 6	128-138	151	136-146	160	144-157	172
5 7	131-142	155	140-151	165	148-161	176
5 8	135-146	160	144-155	170	152-165	181
5 9	139-150	164	148-159	174	156-170	186
5 10	143-154	168	152-163	178	160-175	192
5 11	147-159	174	156-168	184	164-180	197
6 0	152-164	179	161-173	189	169-185	203
6 1	158-170	186	166-179	196	174-191	209
6 2	163-175	192	171-184	201	179-197	216
6 3	168-180	197	176-189	207	184-202	221
6 4	174-186	204	182-195	214	190-208	228
6 5	180-191	209	188-201	220	196-214	234

3. Examinee's frame is ☐ small ☒ medium ☐ large

4. Considering above weight table the examinee's frame and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds

☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

*R. P. Lester*

(Signature of Medical Examiner)

MAR 2 1959

(Date)

August 21, 1959

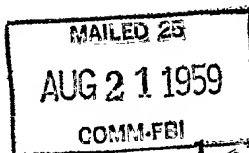
Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

It is a pleasure to commend you and, through you, the members of the Internal Security Section Streamlining Committee for the fine results you achieved during the past six months.

Your fine leadership and the interest and enthusiasm which the committee members displayed were indeed noteworthy. Many excellent and worthwhile suggestions were considered and adopted, thus increasing the efficiency of our operations. Please accept my thanks for your splendid services and express my appreciation for a job well done to the members of this committee.

Sincerely yours,



1 - Mr. Belmont (Personal Attention)

CMT

(7)

67-99243

Place copy of this letter in files of following personnel:  
John T. Harrington ☐ ☐

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
DeLoach \_\_\_\_\_  
McGuire \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
W.C. Sullivan \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐

TELETYPE UNIT ☐

REC'D-READING ROOM

FBI

AUG 21 11 20 AM '59

b6  
b7c

April 22, 1959

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am writing at this time to commend you for the splendid work you did in devising a technique for extending the Bureau's counterintelligence program.

You displayed an unusual amount of originality, initiative and resourcefulness in conceiving this technique and thereafter were most industrious in having it implemented. Your efforts in this regard have been very successful and it is a pleasure to thank you for your excellent services.

Sincerely yours,

1 - Mr. Belmont (Personal Attention)  
Reurmemo 4/20/59 captioned "COMMUNIST PARTY, USA,  
COUNTERINTELLIGENCE PROGRAM, INTERNAL SECURITY-C."

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
DeLoach \_\_\_\_\_  
McGuire \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
W.C. Sullivan \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

CMT:ksr

(4)

67-99243

MAIL ROOM ☐ TELETYPE UNIT ☐

APR 22 3 05 PM '59  
REC'D-READING ROOM  
F.B.I.

PLEASE DO NOT MULTILATE THESE FORMS IN ANY WAY

16  
(HERMAN O. BLY)

Bulet 10/8/59 to BEC  
Forms sent to BEC  
pjs

35 DEC 31 1963

67-11000 RECORDED  
2 OCT 9 1959

COPIES SENT  
WIA OFFICIAL  
PERSE FOLDER

# OFFICIAL SUPERIOR'S REPORT OF INJURY

To be submitted to U. S. DEPARTMENT OF LABOR, BUREAU OF EMPLOYERS' COMPENSATION, Washington 25, D. C., as soon as practicable after any injury to a civil employee of the United States sustained while in the performance of duty which causes any disability for work beyond the day or shift on which the injury occurred or results in any charge against the Bureau for medical expense. This form should be accompanied by C. A. 1.

1. Department of Justice 2. Bureau or office Federal Bureau of Investigation  
(War, Navy, etc.) (Engineering, Navigation, etc.)  
3. Place of employment Justice Bldg. Washington, D.C.  
(Arsenal, navy yard, etc.) (City) (State)  
4. Reporting office FBI Headquarters Washington, D.C.  
(Location of reporting office or division headquarters)  
5. Name of superintendent or foreman in charge when injury occurred Coach (SA) Howard A. Meyers

6. Name of injured employee Herman O. Bly 7. Age 46 8. Sex M 9. Race W  
(Give first name in full) (City or town) (State)  
10. Home address 2308 N. Monroe St. Arlington, Va. Va.  
(Street and number) (City or town) (State)  
11. Occupation and division Special Agent - FBI 12. Was employee doing his regular work? no If not, what work? regular gym activity  
(Give both, as laborer, hull division, helper, machine shop, etc.)  
13. Total length of service with the Government as a civilian? 19 years  
14. How long at present work in this establishment? 19 years  
15. Dates of other injuries none  
16. Rate of pay on date of injury, \$12,555. per year { and subsistence valued at \$ per  
and quarters valued at \$ per  
17. Employee begins work at 9:00 A. m. 18. Regular day's work ends 5:30 P. m.  
(Hour, a. m. or p. m.) (Hour, a. m. or p. m.)  
19. Hours worked per day 8 20. Days paid per week 5

21. Place where injury occurred FBI Gym - Justice Bldg.  
(Give exact location, as name or number of building and division, etc.)  
22. Date of injury October 1, 1959; day of week Thurs.; hour of day 10:30 a. m.  
(a. m. or p. m.)  
23. Date employee stopped work not applicable; day of week; hour of day m.  
(a. m. or p. m.)  
24. Date employee's pay stopped not applicable; day of week; hour of day m.  
(a. m. or p. m.)  
25. Has employee returned to work? not applicable  
(Give date and hour)  
26. Will employee receive pay for any portion of above absence on account of:  
(a) Annual leave not applicable  
(b) Sick leave injury caused no absence from work.  
(Give exact dates)  
(c) Any other reason  
(Give exact dates)  
27. Describe in full how injury occurred little finger left hand, badly bruised when struck by volleyball during supervised gym training.

28. State part of body injured and nature and extent of injury see above.

29. Did injury cause loss of any member or part of member? no If so, describe exactly  
30. Was employee injured while in performance of duty? yes If not, or in doubt, give detailed statement  
31. Was injury caused by:  
(a) Willful misconduct of the employee? no (b) Intention of employee to bring about injury or death of himself or another? no (c) Employee's intoxication? no  
(If any answers to these questions are made in the affirmative, the reporting officer should attach an additional statement giving the reason for his conclusion)  
32. Was written notice of injury given within 48 hours? yes If not, did immediate superior have actual knowledge of injury?  
(Answer to question 1, Form C. A. 1, must be complete if notice was not given within 48 hours)  
33. Names and addresses of witnesses to injury  
SA George W. Hall - FBI Headquarters  
(If disability will continue for more than one day, have statements of witnesses made on reverse side of this form)  
34. Was injury caused by a third party other than a Government employee or agency? no If so, has employee been instructed in procedure under the Bureau's regulations?  
(A detailed statement should be forwarded with this report)

35. Name and address of physician who first attended case Public Health Service  
36. How soon after injury? Following day  
37. To what hospital sent? None Location  
38. Name and address of physician now attending case Public Health Service

Signed this 2nd day of October, 1959  
at Washington, D.C.  
(Signature of reporting officer)  
(Date)

December 23, 1959

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

DEC 23 11 58 AM '59  
REC'D-READING ROOM  
FBI

Dear Mr. Bly:

I am pleased to express my sincere appreciation for your splendid performance at the Seat of Government in connection with an operation of great importance to the Bureau in the security field.

You contributed a great deal to the over-all success realized through your superb assistance in disseminating certain information received from the field. This phase of the undertaking was handled in an expeditious and highly competent manner and was certainly a credit to you and your associates. It is indeed a pleasure to commend you.

Sincerely yours,

1 - Mr. Belmont (Personal Attention)  
Re: CP, USA, 17th National Convention, IS-C.

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
DeLoach \_\_\_\_\_  
McGuire \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
W.C. Sullivan \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

AFH

(4)

67-99243

MAIL ROOM ☐ TELETYPE UNIT ☐

204



## EMPLOYEE'S NOTICE OF INJURY OR OCCUPATIONAL DISEASE

Federal Employees' Compensation Act

This notice should be submitted to the immediate superior by an injured civil employee of the Federal Government, or by someone on his behalf, within 48 hours after the injury. Notice may be given either personally or by mail. It should be retained by the official superior unless the injury causes disability for work beyond the day or shift when injury occurred, or results in any charge against the Bureau for medical expense, when it should be forwarded to the U. S. DEPARTMENT OF LABOR, Bureau of Employees' Compensation, together with the official superior's report of injury, Form C. A. 2. Before compensation is paid, written claim on Form C. A. 4 must be submitted to the Bureau.

Date of this notice October 2, 19 59

1. I hereby certify that I am employed as a Special Agent - FBI  
(Occupation)

at the U.S. Dept. of Justice Bldg. - 9th & Pa. Ave. N.W.; Wash., D.C.  
(Place of employment)

and on Thursday, October 1, 19 59 at 10:30 a m.  
(Day of week) (Date) (Hour, a. m. or p. m.)

I was injured in the performance of my duties at FBI Gym  
(Location where injury occurred)

2. Cause of injury participating in volleyball  
(Describe as best you can how and why injury occurred)

3. Nature of injury little finger left hand badly bruised by volleyball.  
(Name part of body affected—fractured left leg, bruised right thumb, etc.)

4. Names of witnesses to injury SA George W. Hall

5. If this notice was not given within 48 hours after the injury, explain reason for delay and state name of person to whom notice was first given, and when

This injury was not caused by my willful misconduct, intention to bring about the injury or death of myself or of another, nor by my intoxication, and I hereby make claim for compensation and medical treatment to which I may be entitled by reason of the injury sustained by me.

Name Herman O. Bly

Address 2308 N. Monroe St

(Street and number)

Arlington

(City or town)

Va.

(State)

OF MEDICAL EXAMINATION

**F.B.I.**

1. LAST NAME—FIRST NAME—MIDDLE NAME (Type or print) <b>OBLY HEAN O.</b>		2. GRADE AND COMPONENT <b>SA</b>	IDENTIFICATION NUMBER
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>	6. DATE OF EXAMINATION <b>1/13/60</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____	10. AGENCY
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7/12/13</b>	
13. PLACE OF BIRTH <b>VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NNMC</b>		16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)	LAST SIX MONTHS

CLINICAL EVALUATION		NOTES (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)
NORMAL	ABNORMAL	
<input type="checkbox"/>	<input type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP
<input type="checkbox"/>	<input type="checkbox"/>	19. NOSE
<input type="checkbox"/>	<input type="checkbox"/>	20. SINUSES
<input type="checkbox"/>	<input type="checkbox"/>	21. MOUTH AND THROAT
<input type="checkbox"/>	<input type="checkbox"/>	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)
<input type="checkbox"/>	<input type="checkbox"/>	23. DRUMS (Perforation)
<input type="checkbox"/>	<input type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 61)
<input type="checkbox"/>	<input type="checkbox"/>	25. OPHTHALMOSCOPIC
<input type="checkbox"/>	<input type="checkbox"/>	26. PUPILS (Equality and reaction)
<input type="checkbox"/>	<input type="checkbox"/>	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. VASCULAR SYSTEM (Varicose veins, etc.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate, if indicated)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	33. ENDOCRINE SYSTEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	34. G-U SYSTEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	36. FEET
<input checked="" type="checkbox"/>	<input type="checkbox"/>	37. LOWER EXTREMITIES (Exempt feet) (Strength, range of motion)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL
<input checked="" type="checkbox"/>	<input type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	40. SKIN, LYMPHATICS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	41. NEUROLOGIC (Equilibrium tests under item 70)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviation)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	43. PELVIC (Females only) (Check how done)
		<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

*Ext hemorrhoids - xcd*

*offender*

205  
93

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES <b>Meets Dental Standards</b>																																																																			
O—Restorable teeth I—Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (X S)—Fixed bridge, brackets to include abutments	<table border="1"> <tr> <td>R</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>X</td><td>14</td><td>15</td><td>L</td> </tr> <tr> <td>I</td><td>X</td><td>31</td><td>30</td><td>29</td><td>28</td><td>27</td><td>26</td><td>25</td><td>24</td><td>23</td><td>22</td><td>21</td><td>20</td><td>19</td><td>18</td><td>X</td> </tr> <tr> <td>H</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>F</td> </tr> <tr> <td>T</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>T</td> </tr> </table>		R	1	2	3	4	5	6	7	8	9	10	11	12	X	14	15	L	I	X	31	30	29	28	27	26	25	24	23	22	21	20	19	18	X	H																F	T															
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I	X	31	30	29	28	27	26	25	24	23	22	21	20	19	18	X																																																					
H																F																																																					
T																T																																																					

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.020</b>		46. CHEST X-RAY (Place, date, film number and result) <b>1-13-60 (14x17) 4801-60 Neg.</b>	
B. ALBUMIN <b>Neg.</b>		D. MICROSCOPIC <b>Neg.</b>	
C. SUGAR <b>Neg.</b>		E. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result) <b>Neg. 147</b>		48. EKG <b>WNL</b>	
49. OTHER TESTS			

15-9

# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 71		52. WEIGHT 156		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBSE		56. TEMPERATURE 98	
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)					
A. SITTING SYS. 110 DIA. 70		B. RECUMBENT SYS. DIA.		C. STANDING (3 min) SYS. DIA.		A. SITTING 80		B. AFTER EXERCISE		C. 2 MIN. AFTER	
59. DISTANT VISION		60. REFRACTION		61. 75m		NEAR VISION					
RIGHT 20/		CORR. TO 20/		BY S. OX		20/10		CORR. TO		BY	
LEFT 20/		CORR. TO 20/		BY S. OX		20/6		CORR. TO		BY	
62. METEOPHORIA (Specify distance)											
ES°		EX°		R. H.		L. M.		PRISM DIV.		PRISM CONV. CT	
63. ACCOMMODATION		64. COLOR VISION (Test used and result)		65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED					
RIGHT		LEFT		DOE-1946 18/18		CORRECTED					
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)		68. RED LENS TEST		69. INTRAOCULAR TENSION					
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT WV /15 SV /15		250 500 1000 2000 4000 6000 8000									
LEFT WV /15 SV /15		RIGHT									
		LEFT									

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

REC'D - ADMIN. DIV.  
FBI  
JAN 28 4 02 PM '60

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)		76. A. PHYSICAL PROFILE	
		P U L H E S	
77. EXAMINEE (Check)			
A. <input checked="" type="checkbox"/> IS QUALIFIED FOR			
B. <input type="checkbox"/> IS NOT QUALIFIED FOR			
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER.		B. PHYSICAL CATEGORY	
		A B C E	
79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
		J. C. Hattery	
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE	
		J. B. Fenn	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE	

REVIEWING OFFICER

FBI

REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

FBI

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>BLY HERMAN O.</b>		2. GRADE AND COMPONENT OR POSITION <b>SA</b>		IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>		6. DATE OF EXAMINATION <b>1/3/60</b>	
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN		10. DEPARTMENT, AGENCY, OR SERVICE	
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7/12/13</b>		13. PLACE OF BIRTH <b>VIRGINIA</b>	
14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS		16. OTHER INFORMATION	
17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists) <b>V. Good</b>					

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:			
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER	51	Disseased	Cerebral Hemorrh.	51		<input checked="" type="checkbox"/>	HAD TUBERCULOSIS	
MOTHER	76	Nursing home	Heart + diabetes			<input checked="" type="checkbox"/>	HAD SYPHILIS	
SPOUSE	52	good			<input checked="" type="checkbox"/>		HAD DIABETES	mother
	52	good				<input checked="" type="checkbox"/>	HAD CANCER	
BROTHERS	44	good				<input checked="" type="checkbox"/>	HAD KIDNEY TROUBLE	
AND	42	V. good			<input checked="" type="checkbox"/>		HAD HEART TROUBLE	mother
SISTERS						<input checked="" type="checkbox"/>	HAD STOMACH TROUBLE	
					<input checked="" type="checkbox"/>		HAD RHEUMATISM (Arthritis)	wife
CHILDREN	none				<input checked="" type="checkbox"/>		HAD ASTHMA, HAY FEVER, HIVES	
					<input checked="" type="checkbox"/>		HAD EPILEPSY (Fits)	
					<input checked="" type="checkbox"/>		COMMITTED SUICIDE	
					<input checked="" type="checkbox"/>		BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)								
YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LANEENESS
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW
<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		

21. HAVE YOU EVER (Check each item)		22. FEMALES ONLY: A. HAVE YOU EVER—		B. COMPLETE THE FOLLOWING:		
<input checked="" type="checkbox"/>	WORN GLASSES	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE	<input checked="" type="checkbox"/>	BEEN PREGNANT	AGE AT ONSET OF MENSTRUATION
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER	<input checked="" type="checkbox"/>	HAD A VAGINAL DISCHARGE	INTERVAL BETWEEN PERIODS
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS	<input checked="" type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	DURATION OF PERIODS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD	<input checked="" type="checkbox"/>	HAD PAINFUL MENSTRUATION	DATE OF LAST PERIOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION	<input checked="" type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY
23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? <b>15</b>		24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS		25. WHAT IS YOUR USUAL OCCUPATION? <b>SA</b>		26. ARE YOU (Check one) <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
		27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF:
✓		A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
✓		B. INABILITY TO PERFORM CERTAIN MOTIONS
✓		C. INABILITY TO ASSUME CERTAIN POSITIONS
✓		D. OTHER MEDICAL REASONS (If yes, give reasons)
		28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
		29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
		30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
		31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
✓		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
		33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
✓	1	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
✓		35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
✓		36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
✓		37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
✓		38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
✓		39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

tonsilectomy 1937 (age 24)  
 fissure removed from colon 1953 (age 48)  
 appendectomy 1958 (age 45)

struck throat 1937 hospitalized Wash. DC. for 5 days.

Dr. Theodore R. Coleman  
 Doctor's Hospital for appendectomy

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
 I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

SIGNATURE

Herman O. Bly

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

20. All past history + not presently symptomatic except one episode of blood spot following stool several months ago.

32-4-5 No problem at present.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

SIGNATURE

NUMBER OF ATTACHED SHEETS

V. C. Statney

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee  
(Type or print)

BLY HERMAN O.  
Last First Middle

The following portions of the attached examination report form need not be completed:

2	62
3	65
4	67
9	68
11	69
14	72
17	76

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible.

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

The medical examiner should answer the following question:

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

- 15 2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

If examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No

# Weights for Males

Height Feet-Inches	SMALL FRAME		MEDIUM FRAME		LARGE FRAME	
	Desirable	Maximum	Desirable	Maximum	Desirable	Maximum
5 4	121-131	143	129-139	152	136-148	162
5 5	124-134	146	132-142	155	140-152	166
5 6	128-138	151	136-146	160	144-157	172
5 7	131-142	155	140-151	165	148-161	176
5 8	135-146	160	144-155	170	152-165	181
5 9	139-150	164	148-159	174	156-170	186
5 10	143-154	168	152-163	178	160-175	192
5 11	147-159	174	156-168	184	164-180	197
6 0	152-164	179	161-173	189	169-185	203
6 1	158-170	186	166-179	196	174-191	209
6 2	163-175	192	171-184	201	179-197	216
6 3	168-180	197	176-189	207	184-202	221
6 4	174-186	204	182-195	214	190-208	228
6 5	180-191	209	188-201	220	196-214	234

3. Examinee's frame is ☐ small ☒ medium ☐ large

4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds

☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

W. C. Hartney  
(Signature of Medical Examiner)

\_\_\_\_\_  
(Date)

April 13, 1960

Mr. Fred J. Baumgardner  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Baumgardner:

I am writing to commend you and, through you, the personnel under your supervision who worked so capably in the preparation of a brief concerning a certain matter of much interest to the Bureau in the security field.

This was an extremely important and delicate project and required the exercise of considerable attention, competence and diligence by everyone who worked on it. The brief which was prepared was of the highest quality and will prove to be of great value. I want to thank you for your able direction of this matter and I want you to express my appreciation to those who assisted for their excellent work.

Sincerely yours,

1 - Mr. Belmont (Personal Attention)

Re brief dated March, 1960, entitled "Communism and Religion.

CMT  
(29)

Copies prepared and attached for files of:

(OVER)

**DUPLICATE YELLOW**



Mr. Fred J. Baumgardner

Herman O. Bly  
Preston W. Dise  
Joseph D. Donohue  
Frederick F. Fox  
John T. Harrington  
John H. Kleinkauf  
Carlton C. Lenz  
Donald J. McNerney  
John F. Morley  
J. J. O'Connor

[Redacted]

Bowen F. Rose

[Redacted]

b6  
b7C

*SF 2809 Rem moved  
from file to 1st main  
to CC. 8-14-63 [Signature]*

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee BLY HERMAN O. DIV. 5  
(Type or print) WT. 150 1/2 LBS Last First Middle

The following portions of the attached examination report form need not be completed:

2	62
3	65
4	67
9	68
11	69
14	72
17	76

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible.

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

The medical examiner should answer the following question:

Examinee ☐ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

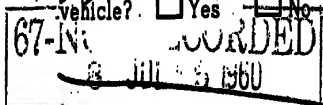
1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☐ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☐ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

Examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No



14

3/10/60

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☒ medium ☐ large
4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☐ Satisfactory ☐ Excessive ☐ Deficient
5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: Weight 150 1/2 Within desirable limits #12  
Height 5' 11"

Stephen Bank Physical Instructor  
 (Signature of Medical Examiner)

July 21, 1960  
 (Date)

August 12, 1960

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

It is indeed a pleasure to recognize your Twentieth Anniversary with the Federal Bureau of Investigation. I extend my sincere congratulations on this occasion and present to you the enclosed Twenty-Year Service Award Key as a token of our deep gratitude for your dedicated services over the past two decades.

I know that a great deal of hard work and many personal sacrifices on your part have been necessary in the proper performance of your duties. Your genuine interest in our problems and your enthusiasm for each new responsibility have enabled you to contribute heavily to our accomplishments and augment our reputation. The many responsibilities that have been placed on you in the various assignments in which you have served have been handled with unusual ability and your services at the Seat of Government, particularly in work of a highly sensitive nature in the security field, have been indicative of skillful and diligent efforts as you have contributed to the execution of our tremendous obligations. At the same time, through your cooperation and willingness to share your wide knowledge and experience with others, you have gained the highest esteem of your associates.

The enclosed Key is a tangible symbol of the ideals of the Bureau and you are entitled to wear it as a reward for your years of devoted work. I hope the future will hold many additional awards for your fine services.

With best wishes and kind regards,

Sincerely,

Tolson \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Belmont \_\_\_\_\_  
Callahan \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Malone \_\_\_\_\_  
McGuire \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
W.C. Sullivan \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Ingram \_\_\_\_\_  
Gandy \_\_\_\_\_

Enclosure

ROOM ☐

TELETYPE UNIT ☐

1 - Mr. Belmont (Personal)

NEM:hmc (4)

67-99243

4:55pm, 8-11-60

209

Delivered personally to  
Mr. Belmont's office.  
hmc

MEDICAL REPORTS

Personnel File of: Bly, Herman Olin

Personnel File No. \_\_\_\_\_

13 14 8 DEC 31 1963

3/rhd

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
46			70 1/2"	153					1-13-60 118
RHYTHM						AXIS DEVIATION (QRS)		RATES	
								AURIC.    VENT.	
INTERVALS						P WAVES			
PR                      QRS                      QT									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									
PRECORDIAL LEADS (Specify)									

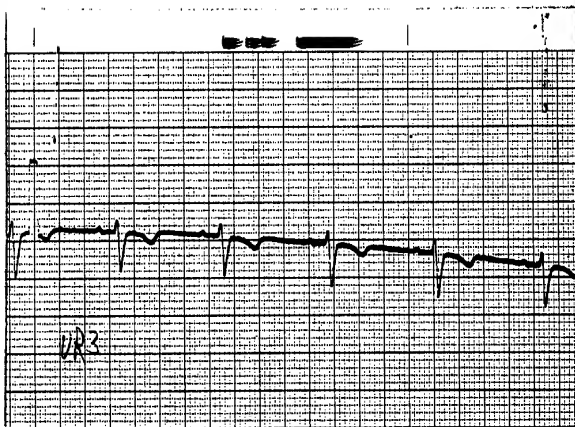
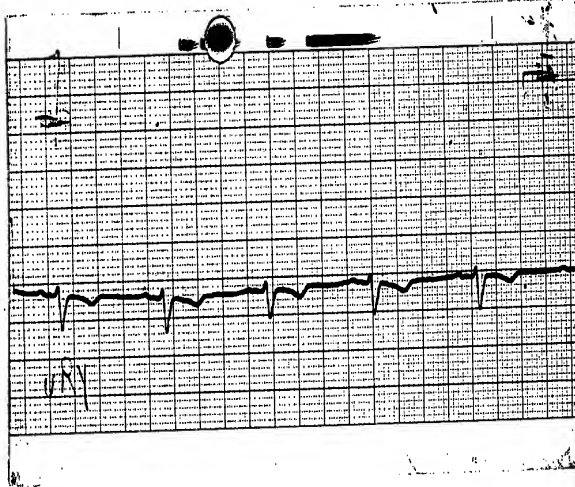
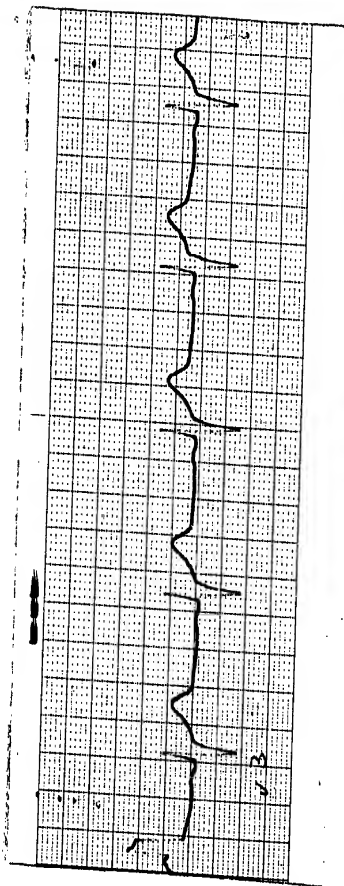
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits
2. No significant change since last tracing.

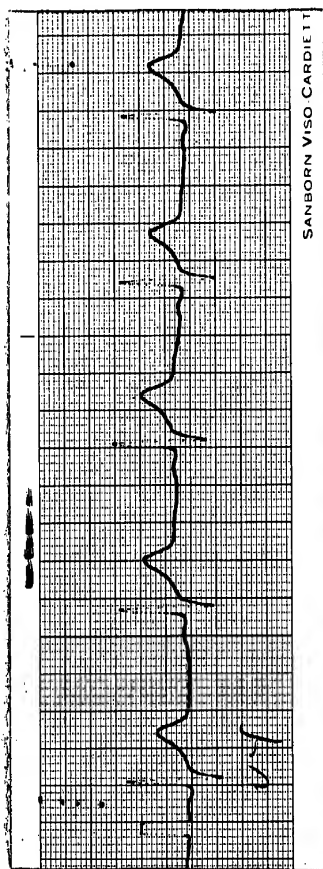
NO. ECG 17897	SIGNATURE  F. H. O'CONNELL mfg	TITLE LCDR MC USN	DATE 1-13-60
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)			WARD NO. ST. CL.

BLY, HERMAN    FBI  
USNH BETHESDA, MD

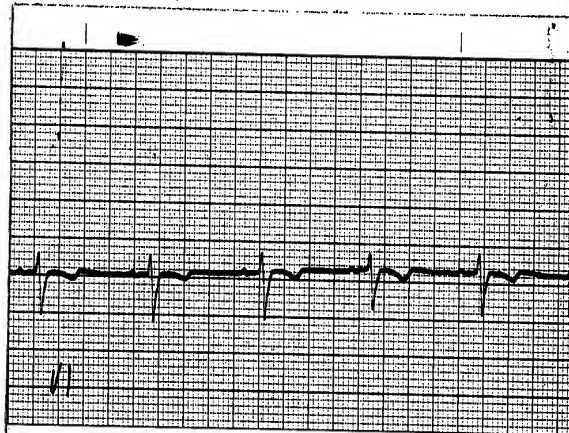
ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)



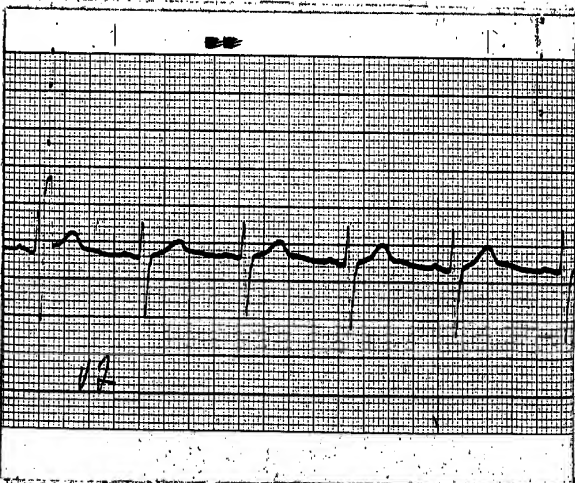
SANBORN VISO C

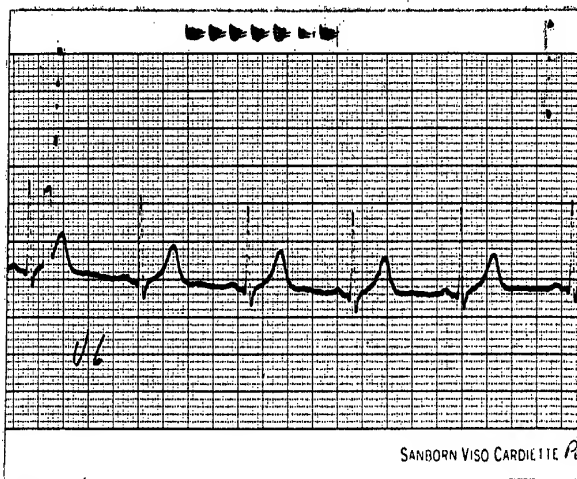
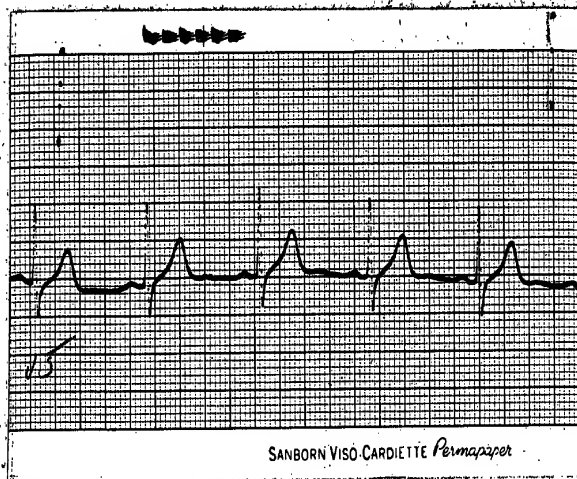


SANBORN VISO CARDIETTE



SANBORN VISO CARDIETTE Permapaper







<b>CLINICAL RECORD</b>		<b>CONSULTATION SHEET</b>	
REQUEST			
TO:	FROM: (Requesting ward, unit, or activity)	DATE OF REQUEST	
<b>EAR CLINIC</b>	<b>STAFF CLINIC</b>	<b>2-6-59</b>	

REASON FOR REQUEST (Complaints and findings)

*This FBI SA appeared this date for his annual physical examination and it was noted he has never been afforded an audiogram. Please do audiogram for record purposes.*

*Thank you,*

PROVISIONAL DIAGNOSIS

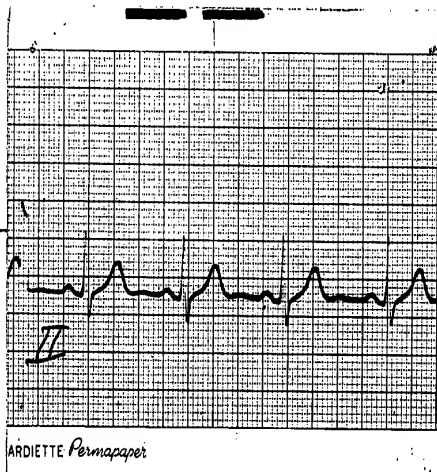
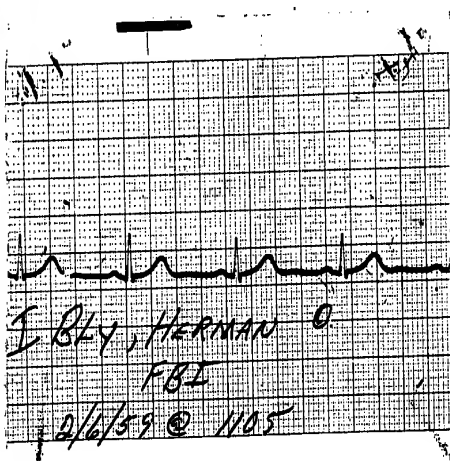
DOCTOR'S SIGNATURE <i>G.R. Johnston</i>	APPROVED	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input checked="" type="checkbox"/> ON CALL	<input type="checkbox"/> EMERGENCY <input checked="" type="checkbox"/> ROUTINE
<b>G.R. JOHNSTON, CAPT. MC, USN</b>		<b>CONSULTATION REPORT</b>	

*2/6/59 - Very slight high tone hearing loss - no treatment indicated*  
*Thank you,*  
*John A. [Signature]*

(Continued on reverse side)

SIGNATURE AND TITLE	DATE	IDENTIFICATION NO.	ORGANIZATION
<b>BLY, HERMAN OLIN</b>			
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
<b>13</b>			<b>Staff Clinic</b>
		<b>CONSULTATION SHEET</b> Standard Form 513	

CLINICAL RECORD					ELECTROCARDIOGRAPHIC RECORD			PREVIOUS ECG	
CLINICAL IMPRESSION					MEDICATION			<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE 45	SEX M	RACE	HEIGHT 70½	WEIGHT 153	B. P.	SIGNATURE OF WARD PHYSICIAN Dr. Johnston			DATE 2-6-59 @ 1105
RHYTHM Sinus					AXIS DEVIATION (QRS) none +30°		RATES AURIC.    VENT. 72		
INTERVALS PR 0.16    QRS 0.10    QT 0.40					P WAVES Normal				
QRS COMPLEXES Normal									
RS-T SEGMENT Normal					T WAVES Normal				
UNIPOLAR EXTREMITY LEADS (Specify)									



SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits.
2. No change since 11-20-57.

13

(Continue on reverse)

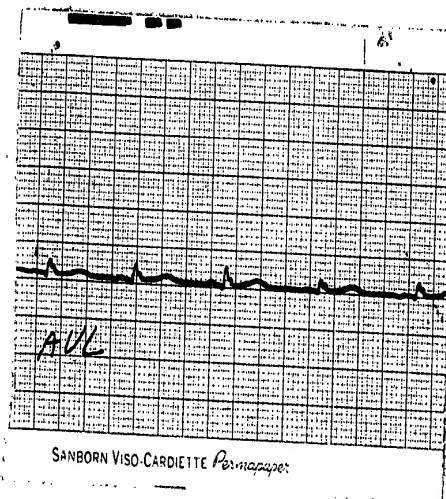
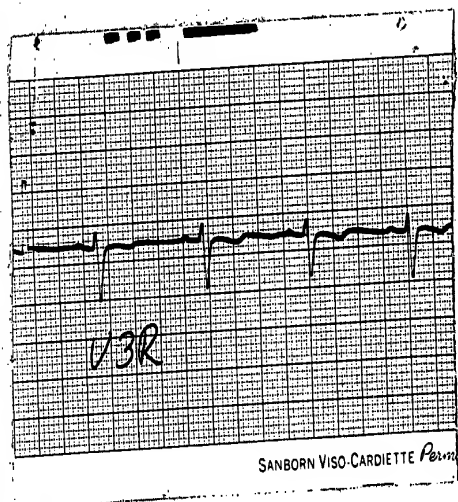
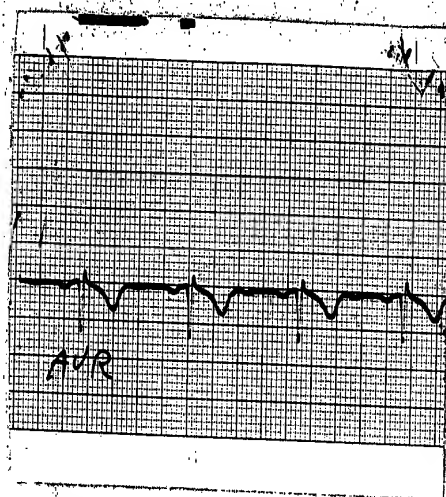
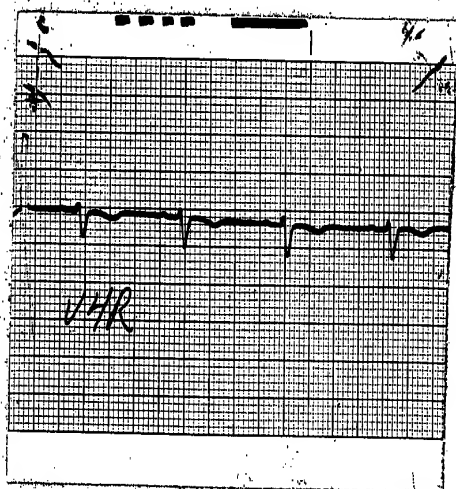
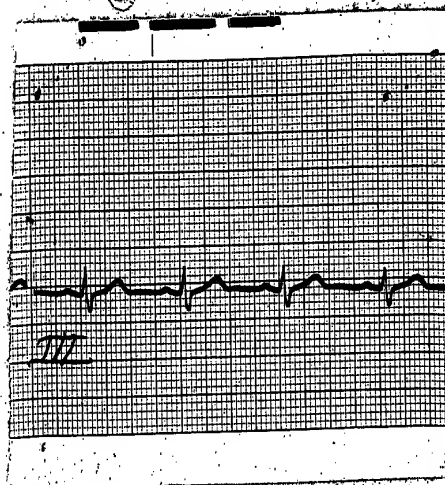
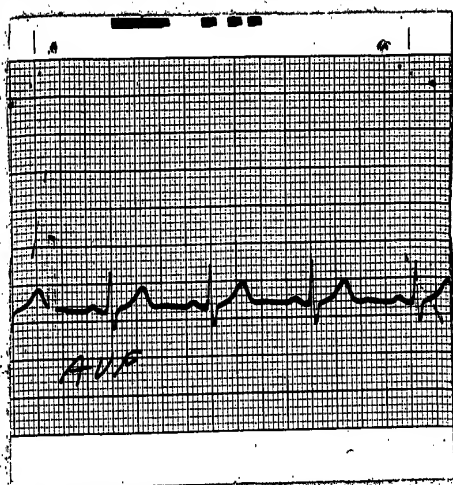
NO. ECG 17897	SIGNATURE J. H. Mazur	TITLE Lt. MC USN	DATE 2-6-59
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME BLY, Herman O.    FBI		REGISTER NO.	WARD NO. Staff Clinic

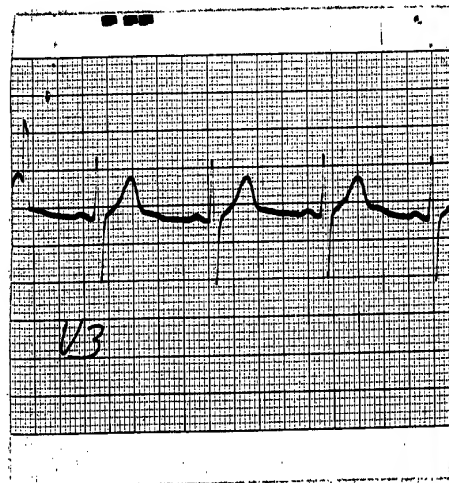
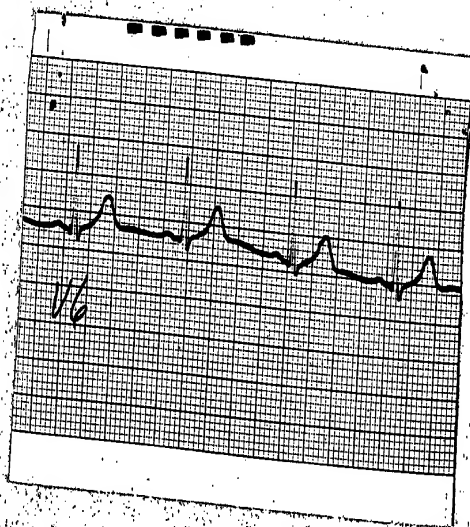
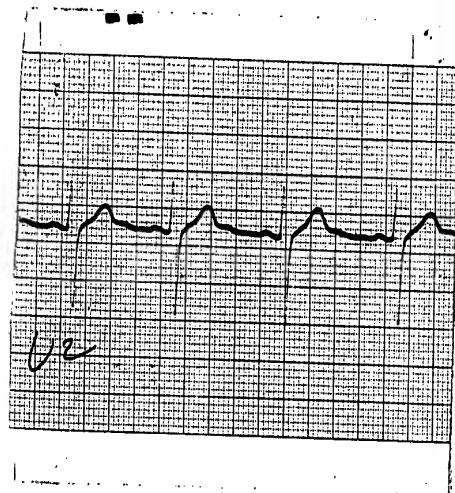
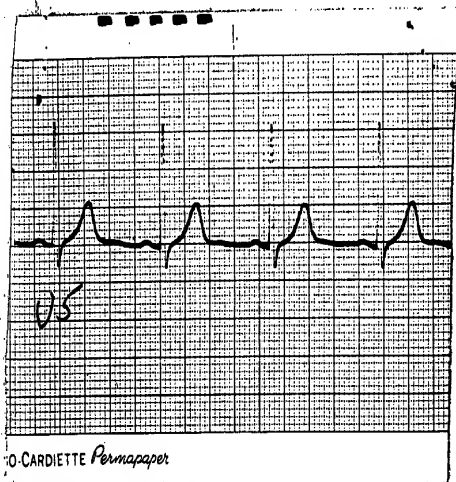
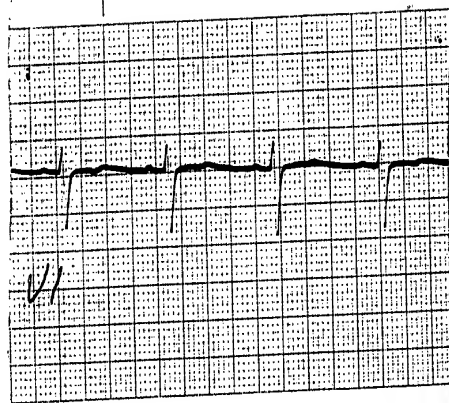
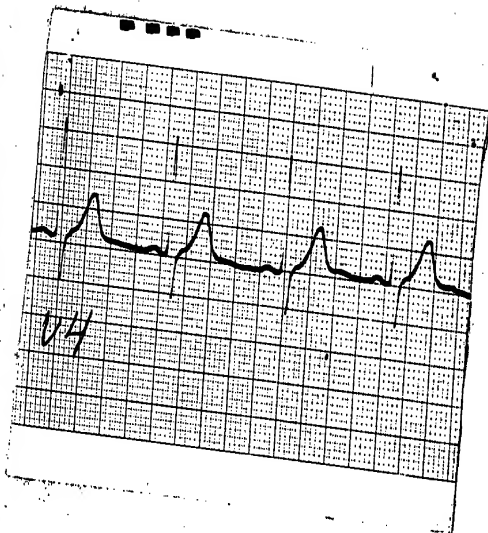
USNHK NMMC, Bethesda, Md.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

(Attach tracings to S. F. 507)





# HEARING RECORD

PRNC-MMC-75

NAME BLY, H. O. AGE       

## AIR CONDUCTION

RIGHT								LEFT							
DATE	125	250	500	1000	2000	4000	8000	125	250	500	1000	2000	4000	8000	EXAMINER
2-6-59	0	0	0	0	20	15	-	0	0	0	0	15	15	23	h

## BONE CONDUCTION

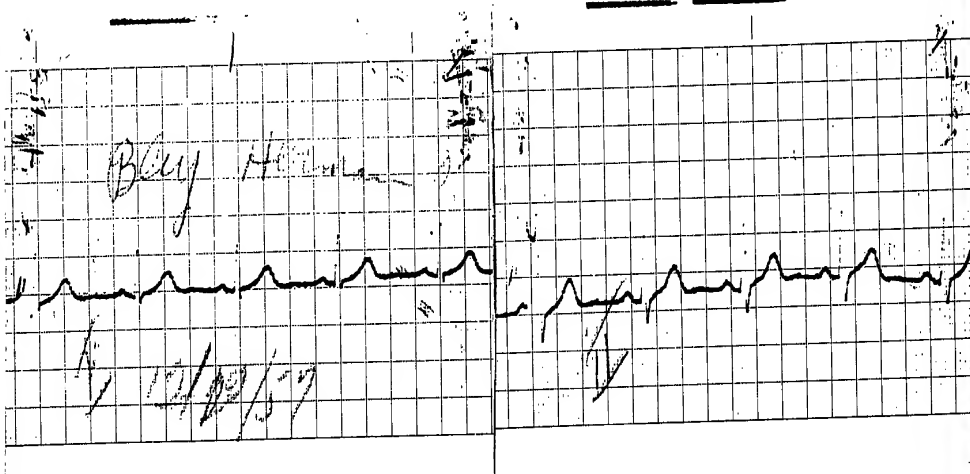
RIGHT										LEFT												
DATE	WHITE NOISE										OPPOSITE EAR MASK AT										LOW TONE	EXAMINER

## SPEECH RECEPTION

DATE		SPOND.	OTHER	MIC.	REC.	DATE		SPOND.	OTHER	MIC.	REC.				
	RIGHT						RIGHT								
	LEFT						LEFT								
	FREE FIELD						FREE FIELD								
DATE		Pd	AT	%	MIC.	REC.	EXAMINER	DATE		Pd	AT	%	MIC.	REC.	EXAMINER
	RIGHT								RIGHT						
	LEFT								LEFT						
	FREE FIELD								FREE FIELD						

REMARKS

CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION				MEDICATION				<input type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input type="checkbox"/> ROUTINE	<input type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
44			70						12/20/57@1100
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal sinus						None 30°		AURIC. VENT. 75	
INTERVALS						P WAVES			
PR .14 QRS .09 QT .32									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (%perif)									



SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits.
2. No significant change since 1/30/57.

13

(Continue on reverse)

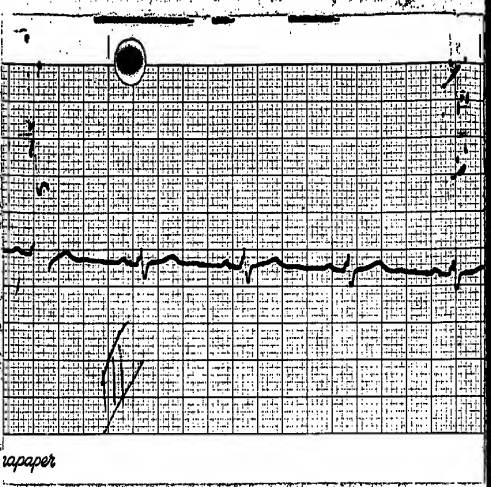
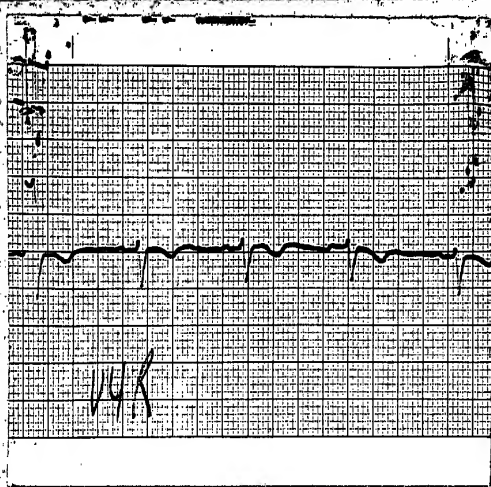
NO.	SIGNATURE	TITLE	DATE
ECG 17897	P. DREIZEN/r/c	LT MC USNR	12/21/57
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
			staff clinic

BLY HERMAN OLIN FBI  
NNMC USNH BETHESDA MD

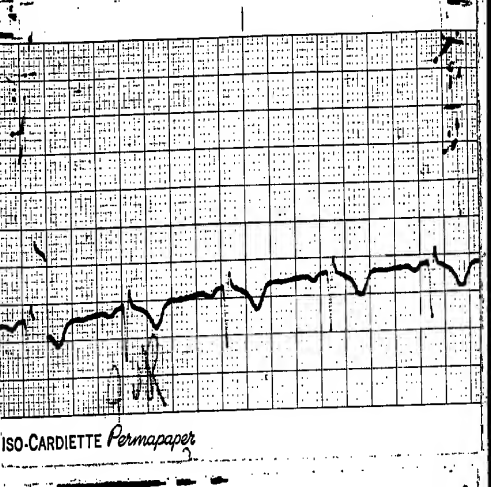
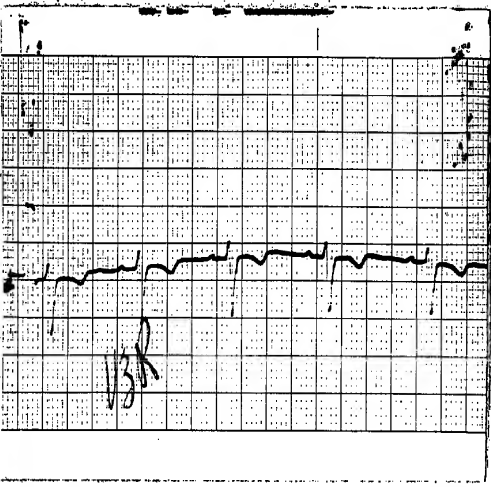
ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

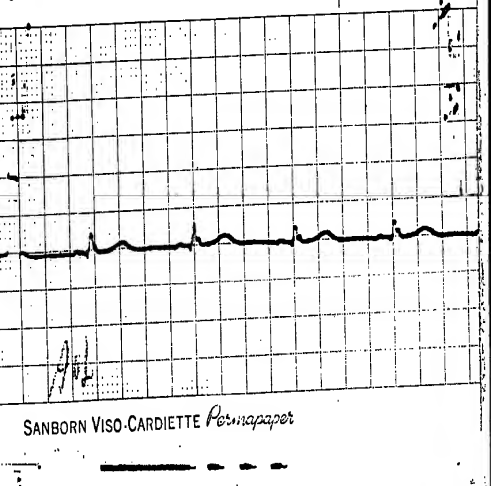
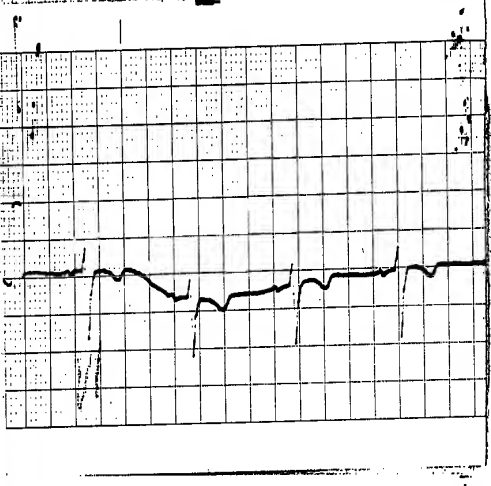
(Attach tracings to S. F. 507)



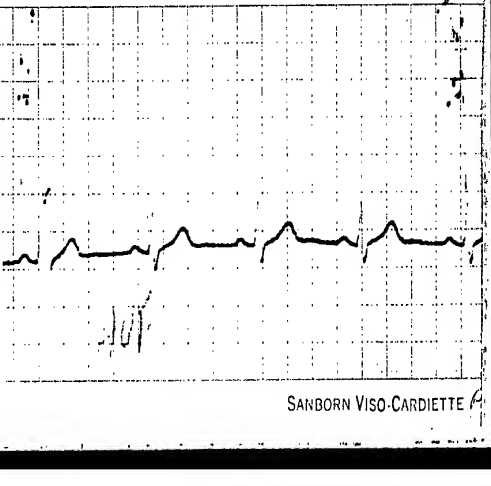
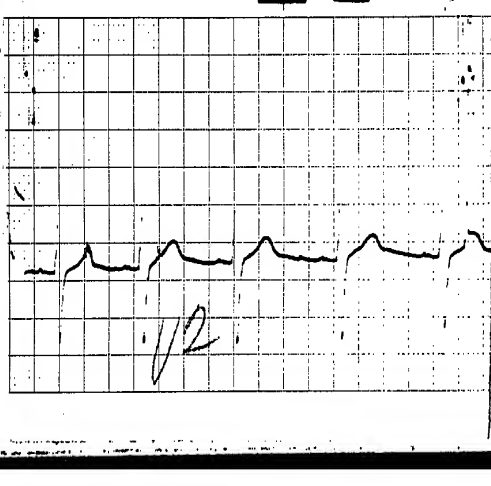
paper



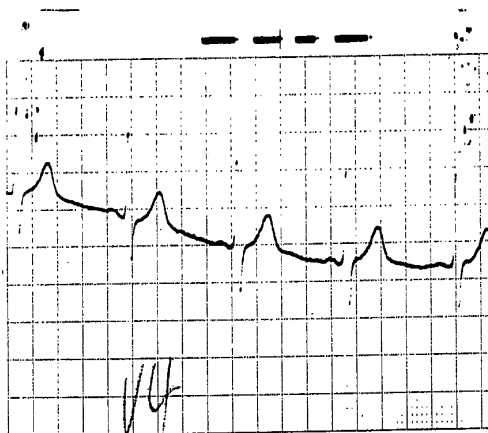
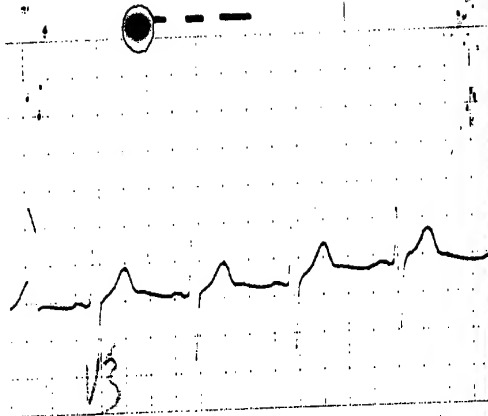
ISO-CARDIETTE Permapaper



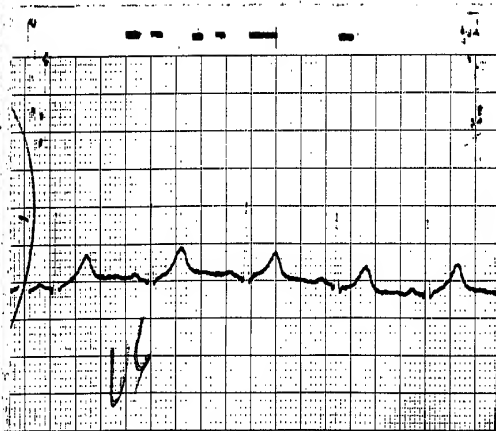
SANBORN VISO-CARDIETTE Permapaper



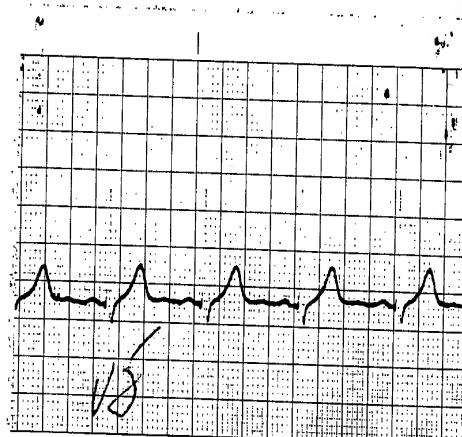
SANBORN VISO-CARDIETTE



SANBORN VISO-CARDIET



SANBORN VISO-CARDIET



SANBORN VISO-CARDIETTE Perm



1-10-10-3  
103

CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: *Proctology* FROM: (Requesting word, unit, or activity) *Staff Clinic* DATE OF REQUEST *20 Dec. 57.*

REASON FOR REQUEST (Complaints and findings)

During annual physical examination this IRT Dept complained of gas in the bowels, which causes him to get up out of bed to pass the gas. This has appeared since he had a fissure removed 2-3 yrs. ago. At one time he has passed blood.

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE *DR Johnston* APPROVED PLACE OF CONSULTATION ☐ BEDSIDE ☒ ON CALL ☐ EMERGENCY ☒ ROUTINE

CONSULTATION REPORT

1/10/58 - Procto.

Inspection - Abdominal scar from fissurectomy.  
Digital - Negative.

Sigmoidoscopy - Sigmoid passed to 25 cm. Anus normal to that level.

~~Recommend~~

Recommend - discontinuance of Metamucil,  
Increase fluid intake, Barium enema.

Thank you

B. Price (T)(M)(USA)

13

(Continued on reverse side)

SIGNATURE AND TITLE DATE IDENTIFICATION NO. ORGANIZATION

PATIENT'S IDENTIFICATION (For typed or written entries give: Name--last, first, middle; grade; date; hospital or medical facility)

*BLV, Herman Olin*

*FBI*

REGISTER NO. WARD NO. *Staff Clinic*

CONSULTATION SHEET  
Standard Form 513

TUES.  
FEB 19  
11:40

CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: *Dermatology*

FROM: (Requesting ward, unit, or activity)  
*Staff Clinic*

DATE OF REQUEST  
*30 Jan 57*

REASON FOR REQUEST (Complaints and findings)

*C.C. Warts*

*This FBI agent on annual physical revealed moderate sized warts on head, back + perineum, and some small ones on trunk.*

*Please examine + advise*

PROVISIONAL DIAGNOSIS

*Verruca*

DOCTOR'S SIGNATURE

*G. P. Huston*

APPROVED

PLACE OF CONSULTATION

☐ BEDSIDE

☒ ON CALL

☐ EMERGENCY

☒ ROUTINE

CONSULTATION REPORT

*Multiple Soft fibromas of skin -  
Are removed from back perineum and neck.  
J. Melnick*

13

(Continued on reverse side)

SIGNATURE AND TITLE

DATE

IDENTIFICATION NO.

ORGANIZATION

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

*BLY, Herman O.*

REGISTER NO.

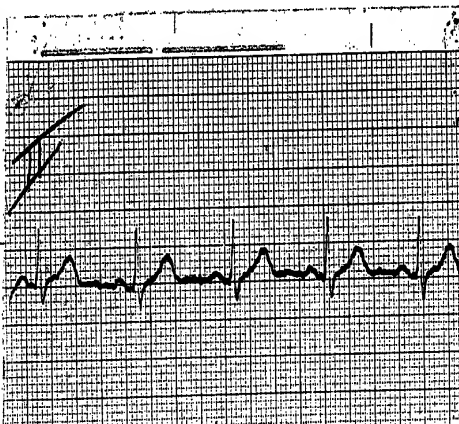
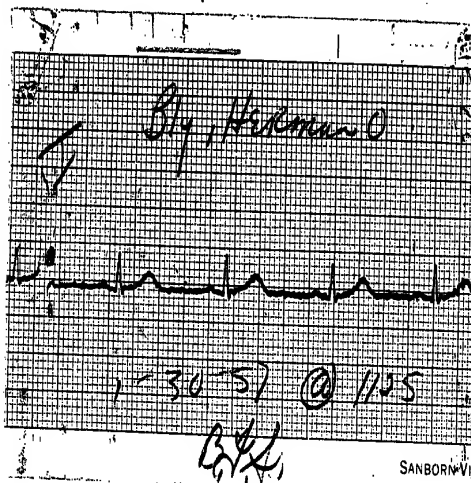
WARD NO.

*Staff Clinic*

CONSULTATION SHEET

Standard Form 513

<b>CLINICAL RECORD</b>				<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION				MEDICATION				<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE 43	SEX M	RACE	HEIGHT 70"	WEIGHT 155	B. P.	SIGNATURE OF WARD PHYSICIAN DR. JOHNSTON		DATE 1/30/57 @ 1125	
RHYTHM Regular Sinus				AXIS DEVIATION (QRS) N		RATES AURIC. VENT. 80			
INTERVALS PR .14 QRS .08 QT .38				P WAVES					
QRS COMPLEXES				T WAVES					
RS-T SEGMENT				UNIPOLAR EXTREMITY LEADS (Specify)					



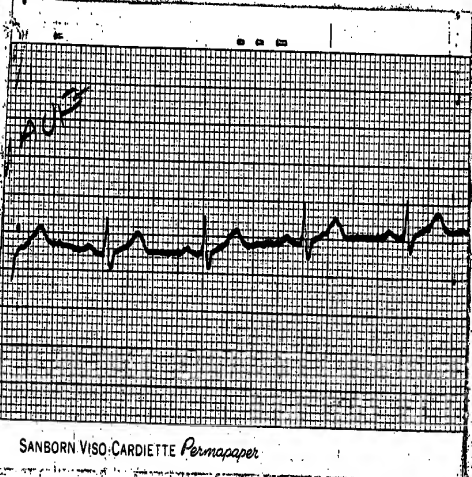
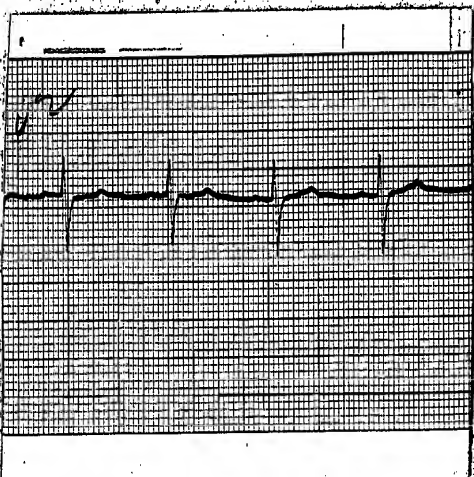
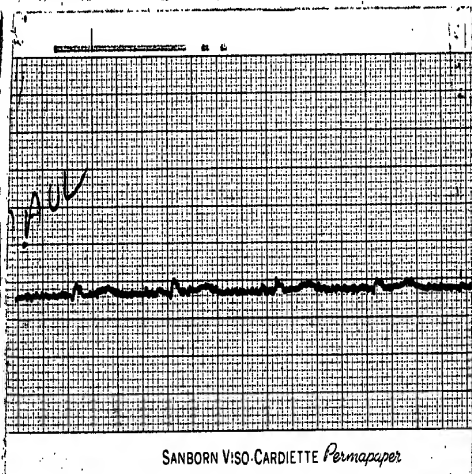
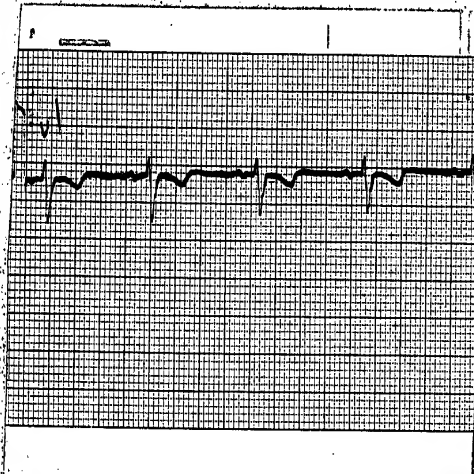
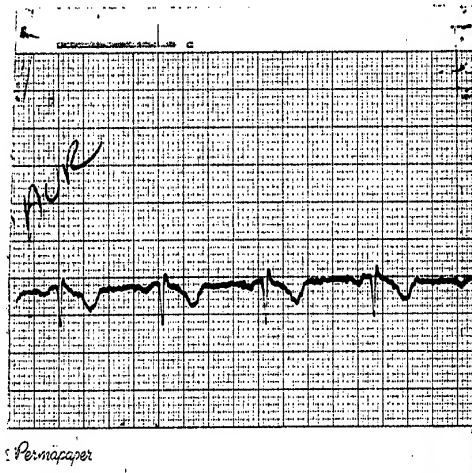
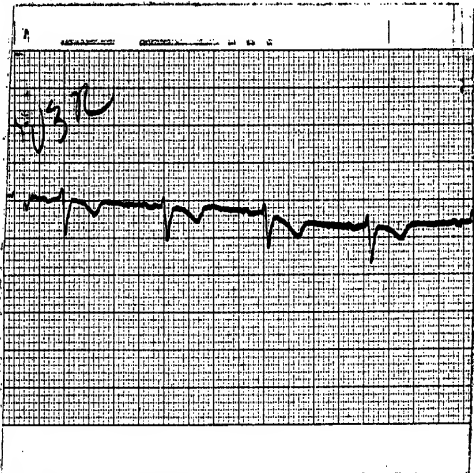
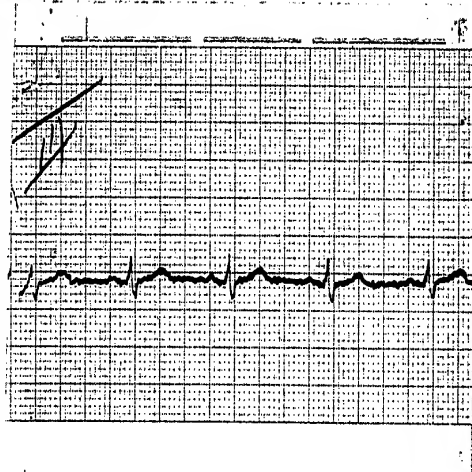
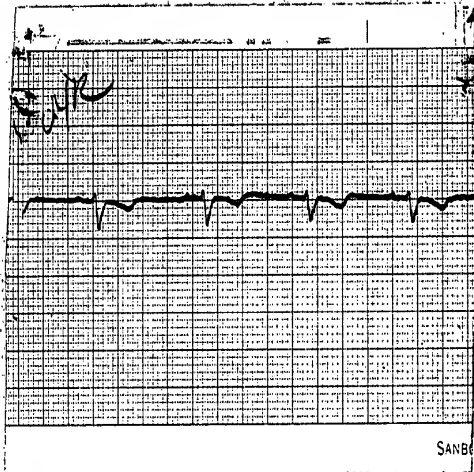
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

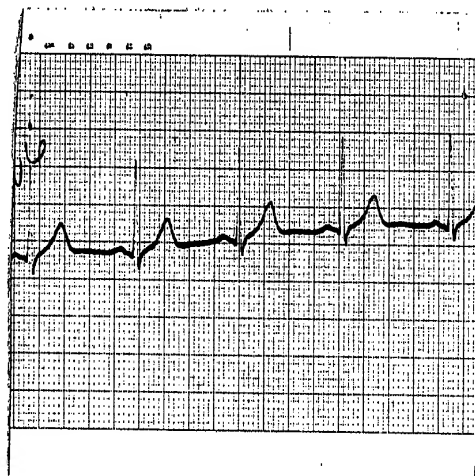
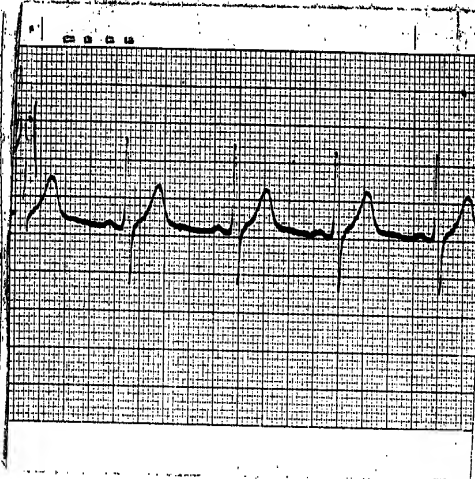
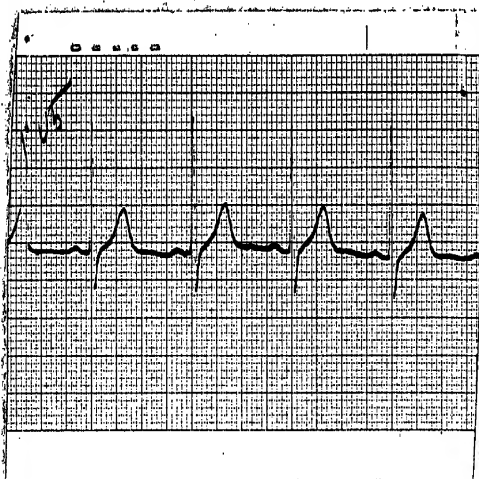
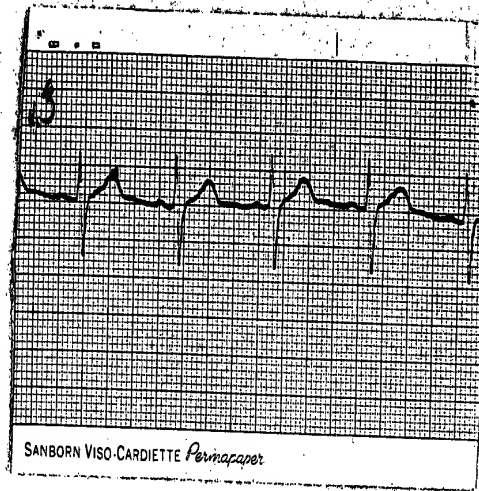
1. Within normal limits
2. No significant change since 1/30/56

(Continue on reverse)

NO. ECG 17897	SIGNATURE DR. SHUGOLL /bas	TITLE LT MC USNR	DATE 1/30/57
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)			REGISTER NO.
BLY, HERMAN O. FBI NNMC USNH BETHESDA, MD.			WARD NO. ST. CLINIC

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)





CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION				MEDICATION				<input type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input type="checkbox"/> ROUTINE	<input type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
42	M		5'10 1/2"	163		Dr. Johnston			1-30-56 @1130
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal sinus						Intermediate		AURIC.	VENT. 75
INTERVALS						P WAVES			
PR .14 QRS .08 QT									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

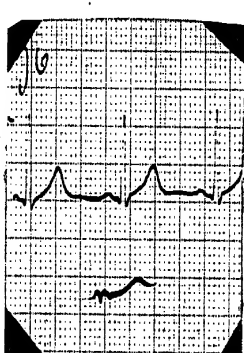
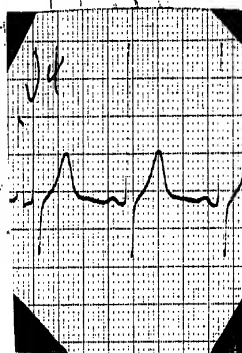
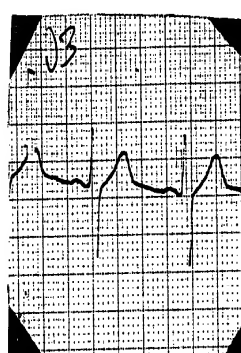
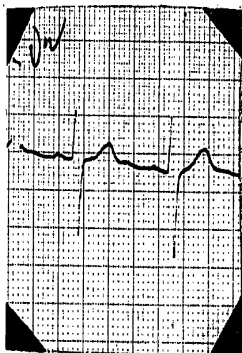
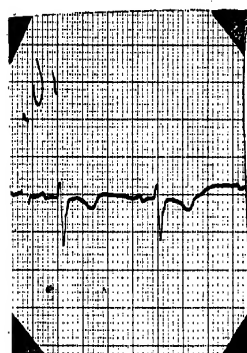
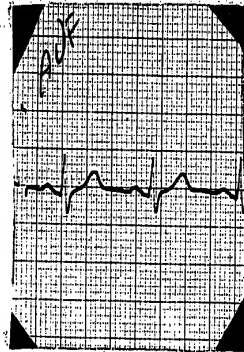
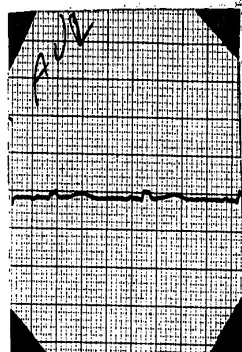
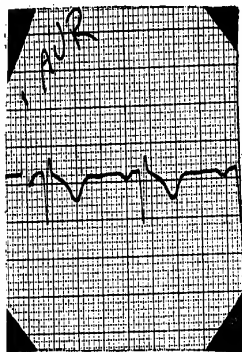
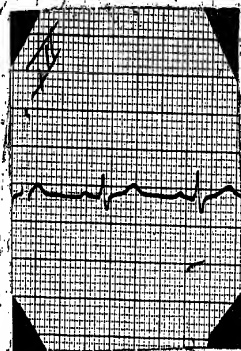
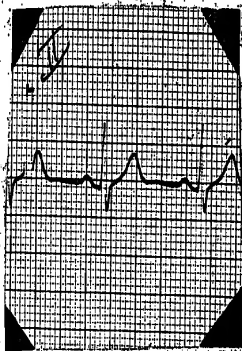
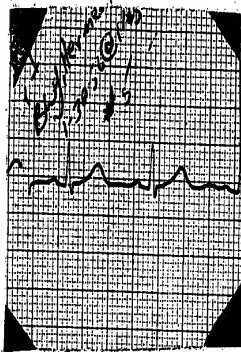
1. Within normal limits.

13 *[Signature]* (Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG 17897	F. H. CARTER	I.T MC USNR	1-31-56
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO.
BLY, Herman O.		F.B.I.	STAFF CLINIC

USNH, BETHESDA, MD.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)





<b>CLINICAL RECORD</b>						<b>ELECTROCARDIOGRAPHIC RECORD</b>						PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION						<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	S. P.	SIGNATURE OF WARD PHYSICIAN						DATE	
41	M		5'10 1/2"	162		Dr. Aspen						2-8-55	
RHYTHM						AXIS DEVIATION (QRS)						RATES	
Normal rhythm												AURIC. VENT. 75	
INTERVALS						P WAVES							
PR .16 QRS .08 QT													
QRS COMPLEXES													
RS-T SEGMENT						T WAVES							
						Upright T-1, 2, 3.							
UNIPOLAR EXTREMITY LEADS (Specify)													

PRECORDIAL LEADS (Specify)

Inverted T-V1, Upright T-V2 thru V6.

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

Normal electrocardiogram.

13

(Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG 17897	J. WILLIS HURST	LT MC USNR	2-8-55
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO.
BLY, Herman O.		F.B.I.	St. Clinic

USNH, BETHESDA, MD.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

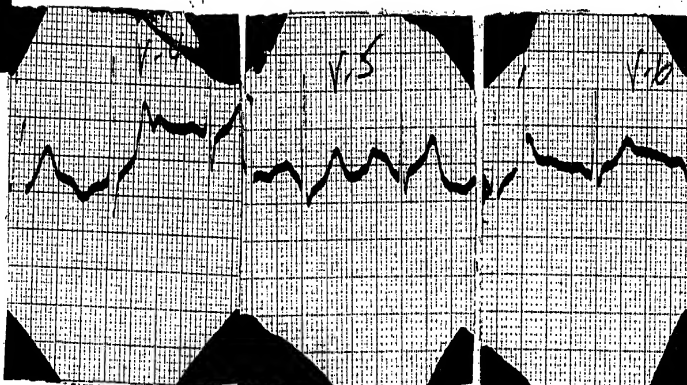
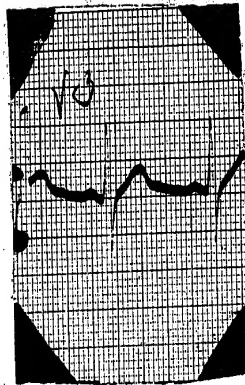
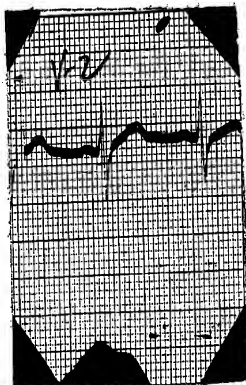
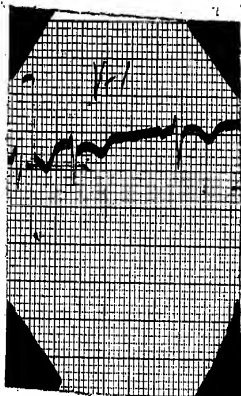
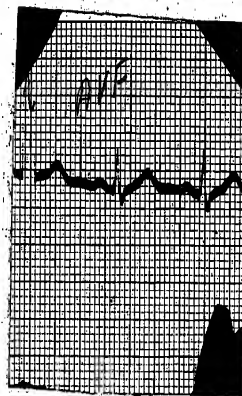
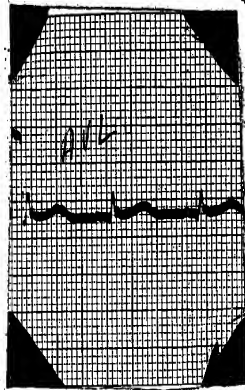
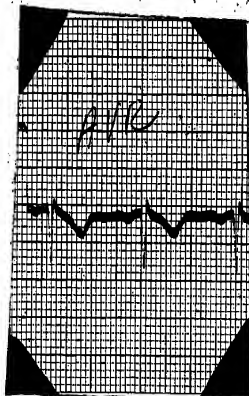
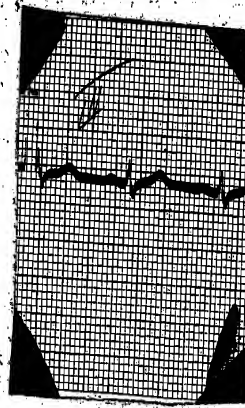
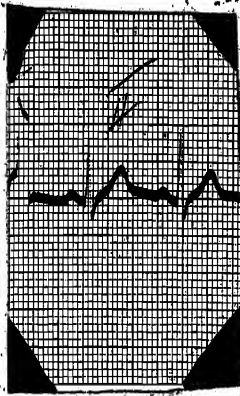
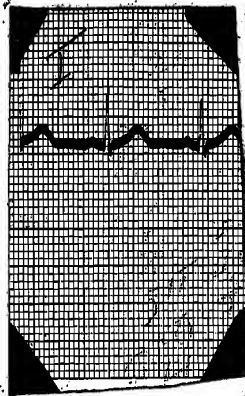
ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

(Attach tracings to S. F. 507)



12-8



en

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE	
								<input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
RHYTHM						AXIS DEVIATION (QRS)		RATES	
N SINUS						N		AURIC. VENT. 82	
INTERVALS						P WAVES			
PR .16 QRS .08 QT .38						N			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			

UNIPOLAR EXTREMITY LEADS (Specify)

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

NORMAL TRACING

13

(Continue on reverse)

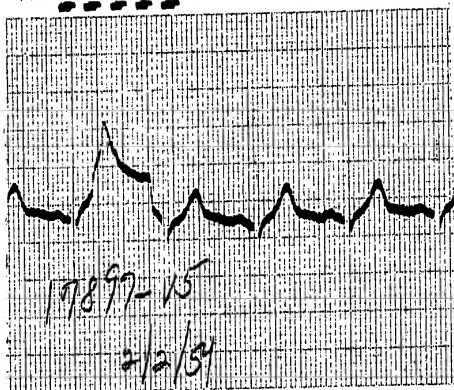
NO.	SIGNATURE	TITLE	DATE
ECG 17897	R.J. WHIPPLE	CDR (MC) USN	2-2-54
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO.
BLY, HERMAN O.			ST. CLINIC

USNH, BETHESDA, MD.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

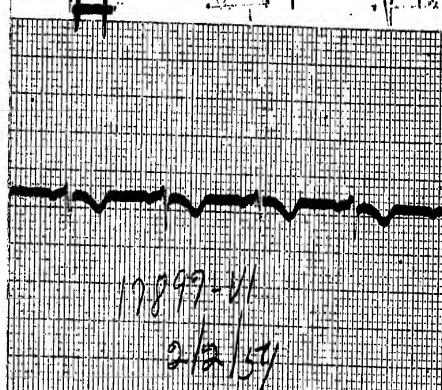
ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

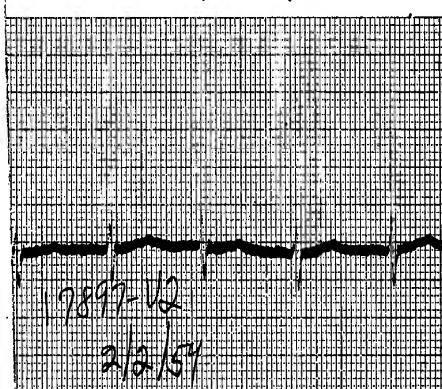
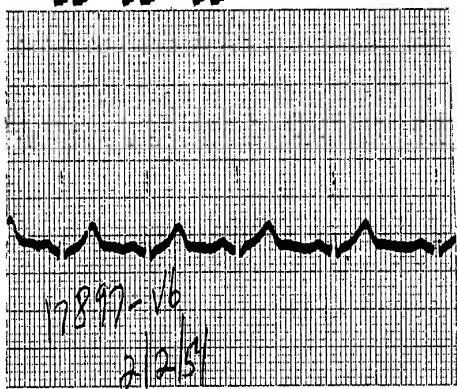
(Attach tracings to S. F. 507)



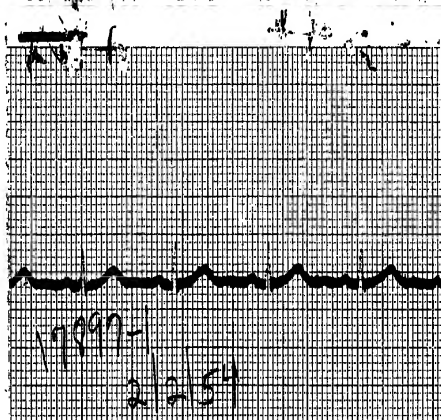
SANBORN VISO-CARDIETTE *Permapaper*



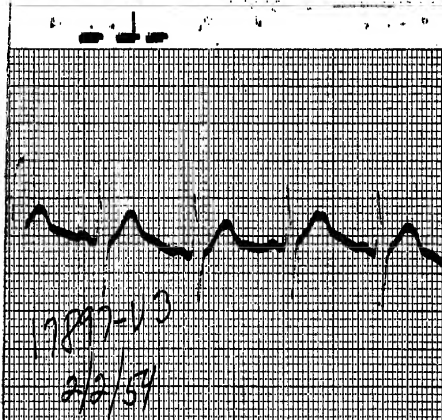
SANBORN VISO-C



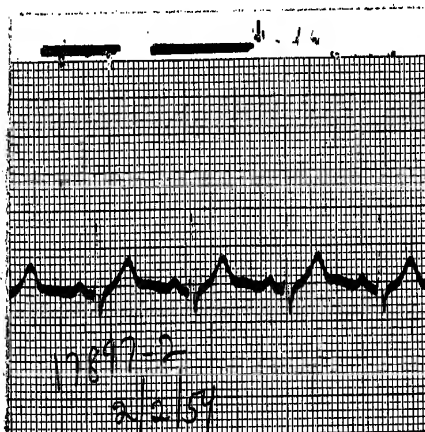
VISO-CARDIETTE *Permapaper*



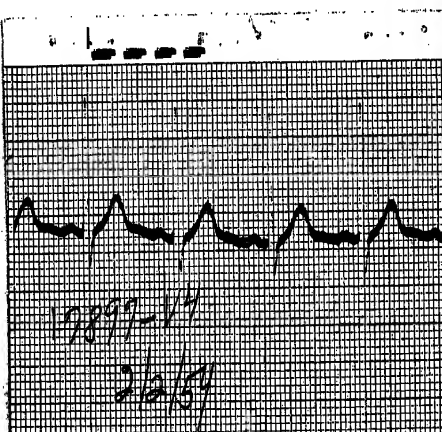
SANBORN VISO-C

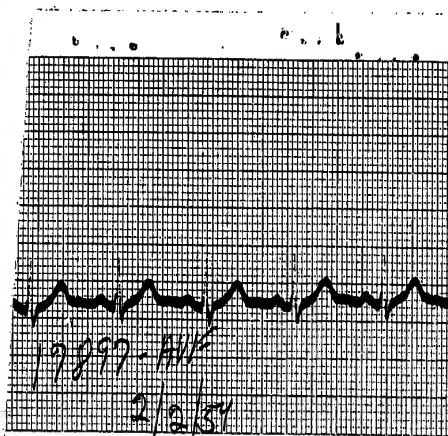
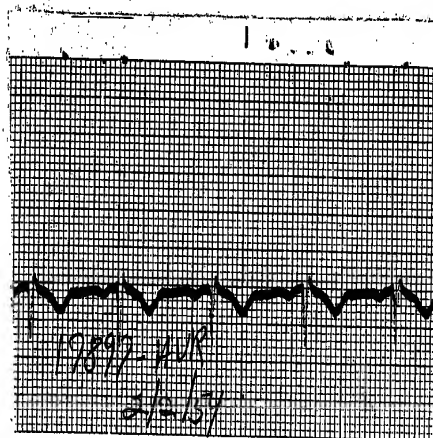
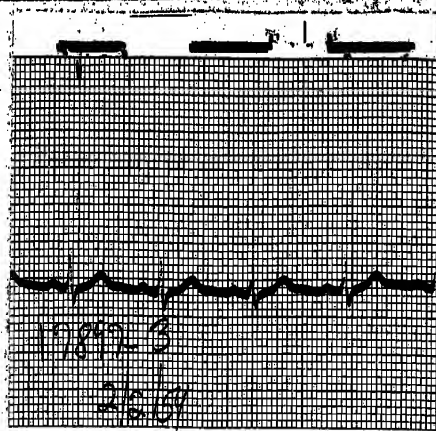


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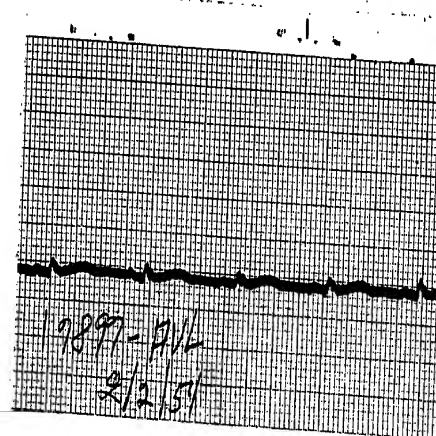


VISO-CARDIETTE *Permapaper*





SANBORN VISO-CARDIETTE *Permapaper*



SANBORN VISO

Feb 17  
11:30

CLINICAL RECORD		CONSULTATION SHEET	
REQUEST			
TO: <i>678 2-10</i>	FROM: (Requesting ward, unit, or activity) <i>2-10</i>	DATE OF REQUEST <i>2-17-54</i>	
REASON FOR REQUEST (Complaints and findings) <i>1. D. &amp; 2. 10</i>			
PROVISIONAL DIAGNOSIS <i>2-10</i>			
DOCTOR'S SIGNATURE	APPROVED	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ON CALL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> ROUTINE
CONSULTATION REPORT			

Extremity examination negative - no hemorrhoids, fissures or fistulas. Site of previous excision of fissure shows good scar tissue.

Anal sphincter intact, shows marked spasm but no stenosis.

Remainder of proctoscopic exam up to 20 cms negative. Bowel well prepared - mucosa healthy.

Active build former added to diet - such as Metamucil.

13

(Continued on reverse side)

SIGNATURE AND TITLE <i>John W. Gray</i>	DATE <i>2-17-54</i>	IDENTIFICATION NO.	ORGANIZATION
PATIENT'S LAST NAME-FIRST NAME-MIDDLE NAME <i>BLT, HERMAN O.</i>		REGISTER NO.	WARD NO.

CONSULTATION SHEET  
Standard Form 513

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

# CLINICAL RECORD

# ELECTROCARDIOGRAPHIC RECORD

PREVIOUS ECG

☐ YES ☐ NO

CLINICAL IMPRESSION

MEDICATION

☐ EMERGENCY ☐ BEDSIDE  
☐ ROUTINE ☐ AMBULANT

AGE SEX RACE HEIGHT WEIGHT B. P. SIGNATURE OF WARD PHYSICIAN

DATE

RHYTHM

NORMAL SINUS RHYTHM

AXIS DEVIATION (QRS)

NORMAL

RATES

AURIC. VENT. 76

INTERVALS

PR .14 QRS .10 QT .36

P WAVES

NORMAL

QRS COMPLEXES

RS-T SEGMENT

T WAVES

UNIBOLAR EXTREMITY LEADS (Specify)

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

CONCLUSION: NORMAL ECG. NO CHANGE

(Continue on reverse)

NO. ECG 570	SIGNATURE DRS SIKES & EYER	TITLE	DATE 2-27-53
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME BLY, HERMAN O.		REGISTER NO.	WARD NO. ST. CLINIC

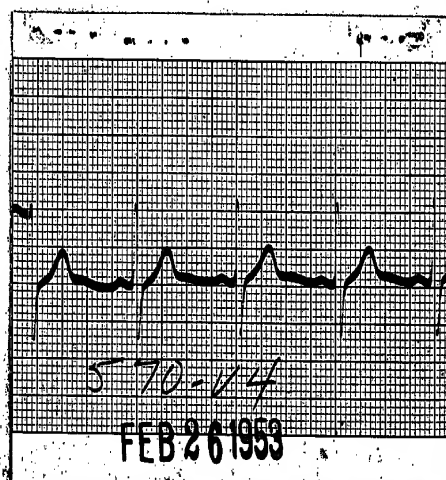
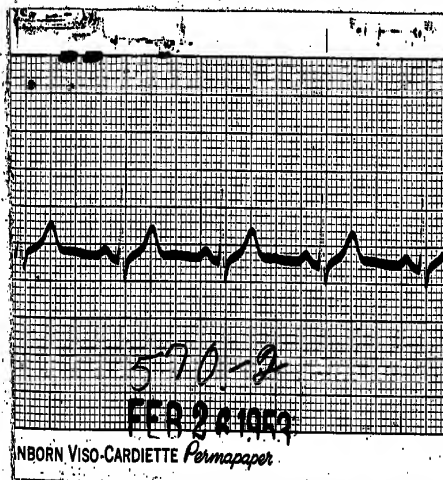
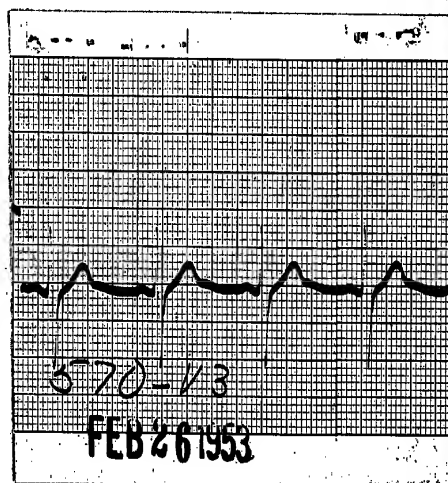
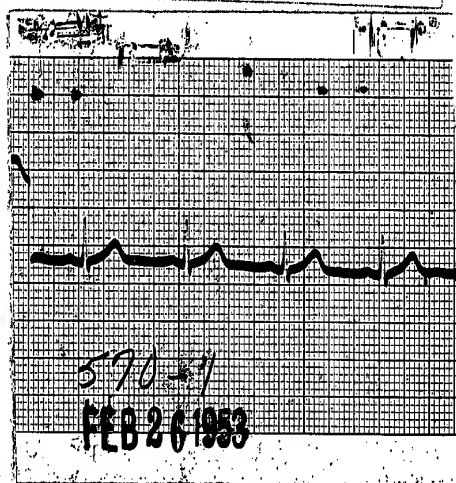
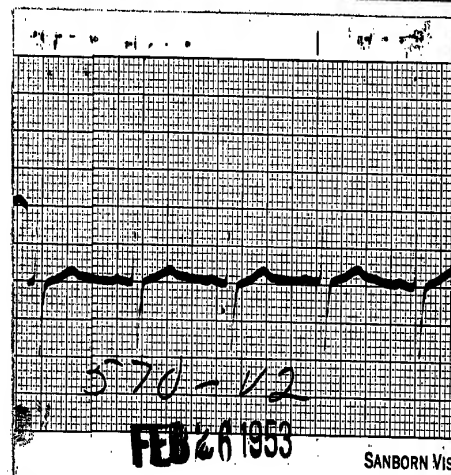
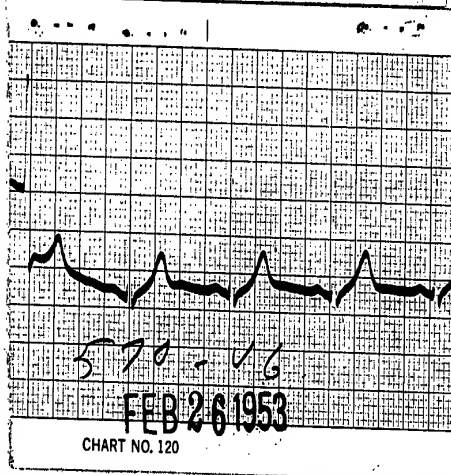
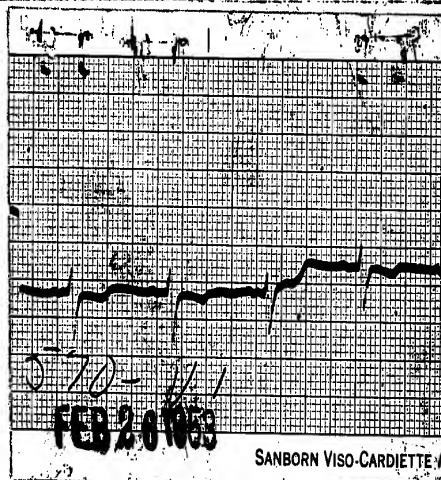
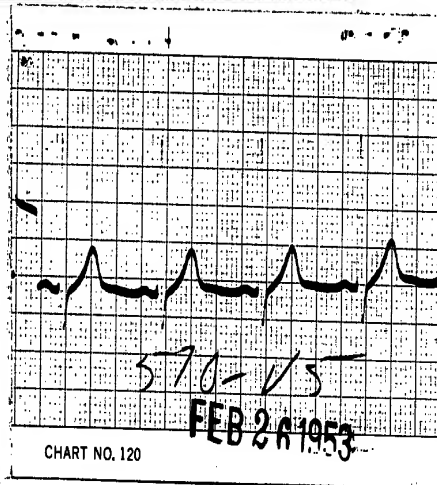
ELECTROCARDIOGRAPHIC RECORD

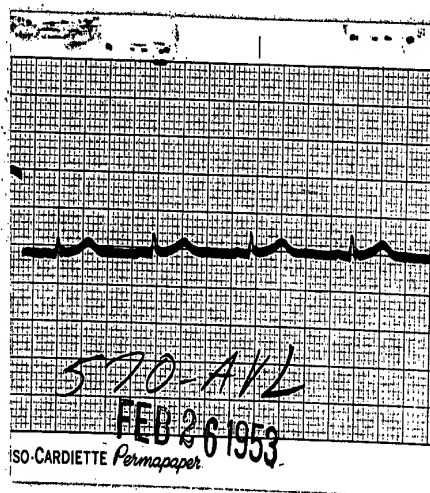
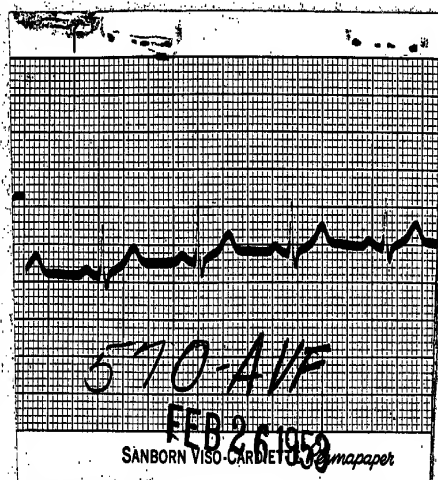
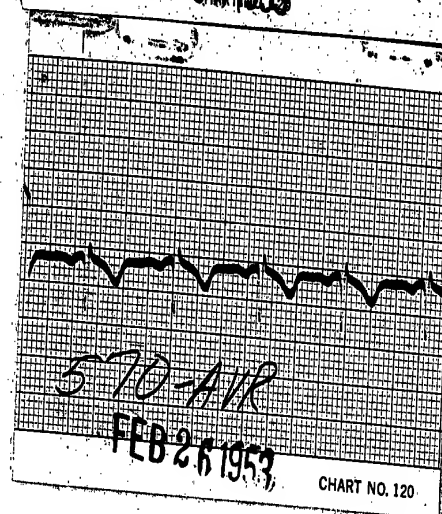
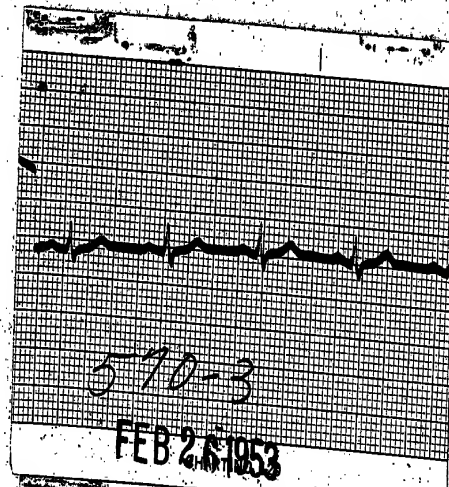
Standard Form 520

(Attach tracings to S. F. 507)

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)









See Dr. Gerber T-12

Standard Form 518  
Rev. Feb. 1961  
Promulgated  
By Bureau of the Budget  
Circular A-32

CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: Proctology FROM: Staff Clinic DATE OF REQUEST: 2/26/53

REASON FOR REQUEST (Complaints and History)  
This F.B.I. Agent noted low abs. discomfort 2-3 mos. ago, on forward bending. Also notes change in bowel habits at that time, becoming constipated. Took laxatives regularly.  
4 weeks ago resp. after R. by L.M.D. - cured.  
2 wks. ago 4 day one week later developed a painful hemorrhoid which was lacerated. Two days later passed

PROVISIONAL DIAGNOSIS

Hemorrhoids, mixed

DOCTOR'S SIGNATURE: [Signature] APPROVED: [Signature] PLACE OF CONSULTATION: ☐ BEDSIDE ☐ ON CALL ☐ ROUTINE ☐ EMERGENCY

CONSULTATION REPORT

about 1 cny red blood. No blood since.  
This man has been having ribbon stools  
past 2-3 mos.  
Would appreciate opinion. Thank.

227-53. Has a small, but chronic, anal fissure at site of previous thrombosed hemorrhoid. Sigmoidoscopy otherwise negative. All symptoms, including ribbon stools & abd pain, can be related to fissure, but would advise biopsy 1/3 crema prior to surgery.  
(Continued on reverse side)

SIGNATURE AND TITLE: [Signature] DATE: [Blank] IDENTIFICATION NO.: [Blank] ORGANIZATION: [Blank]  
PATIENT'S LAST NAME-FIRST NAME-MIDDLE NAME: BLV, Herman REGISTER NO.: [Blank] WARD NO.: [Blank]

CONSULTATION SHEET  
Standard Form 518

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

Address reply to  
Commanding Officer

nch

U. S. NAVAL HOSPITAL  
NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND



BLY, HERMAN OLIN

CIV HUM NON-IND

3-18-53      Admitted this date with diagnosis of:  
Fissure, anus. #5740

OPERATIONS:

3-19-53      Sphincterotomy, anal. #455

SUMMARY:

Admitted complaining of rectal discomfort of approximately three months duration. Approximately three weeks prior to onset had severe diarrhea following treatment with Aureomycin. One episode of bright red bleeding following defecation in January this year.

Physical examination negative except for moderate anal sphincter spasm and tenderness posteriorly on the right.


On 3-19-53 patient was taken to the operating room and some scar tissue was excised and a posterior superficial sphincterotomy was performed.

Postoperatively patient did well. Discharged to home on sitz bath and metamucil therapy, to return for out-patient care.

3-20-53      Discharged to home this date.

D

2

  
C. S. DURDEN  
LT MC USN

APPROVED:

  
F. V. BERLEY

CDR MC USN

ASST. CHIEF OF SURGERY

13

100  
on 7/18

CLINICAL RECORD		CONSULTATION SHEET	
REQUEST			
TO: 5:4.	FROM: (Requesting word, unit, or activity) Staff Clinic	DATE OF REQUEST 7-10-53	
REASON FOR REQUEST (Complaints and findings) Constipation (stool met), abdominal distention, bloating, and a gradual gain in abdominal girth. No pain or tenderness at all, but 15 lbs. over weight. Urine negative for blood and sugar.			
PROVISIONAL DIAGNOSIS S. (Sporadic colitis)			
DOCTOR'S SIGNATURE J. M. Walker	APPROVED	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ON CALL	<input type="checkbox"/> ROUTINE <input type="checkbox"/> EMERGENCY
CONSULTATION REPORT			

of heart. In view of this, I believe diagnosis is correct, but I have possibility regional ileitis and am concerned to possibility of bladder or referred pain from left inguinal canal. Would you like to do a dissection?  
I appreciate your thoughts and any studies you deem indicated.  
Thank

17, July 1953 A #21Fr. Brown-Burger cystoscope passed without difficulty. Inspection of bladder, trigone, ureteral orifices and bladder neck appear normal. Rectal exam reveals a normal prostate.  
Urine--Negative.

(Continued on reverse side)

SIGNATURE AND TITLE B.S. TALBOT CDEMC USN	DATE 17, July	IDENTIFICATION NO.	ORGANIZATION
PATIENT'S LAST NAME--FIRST NAME--MIDDLE NAME Gly, Herman		REGISTER NO. F.B.I.	WARD NO. Staff clinic

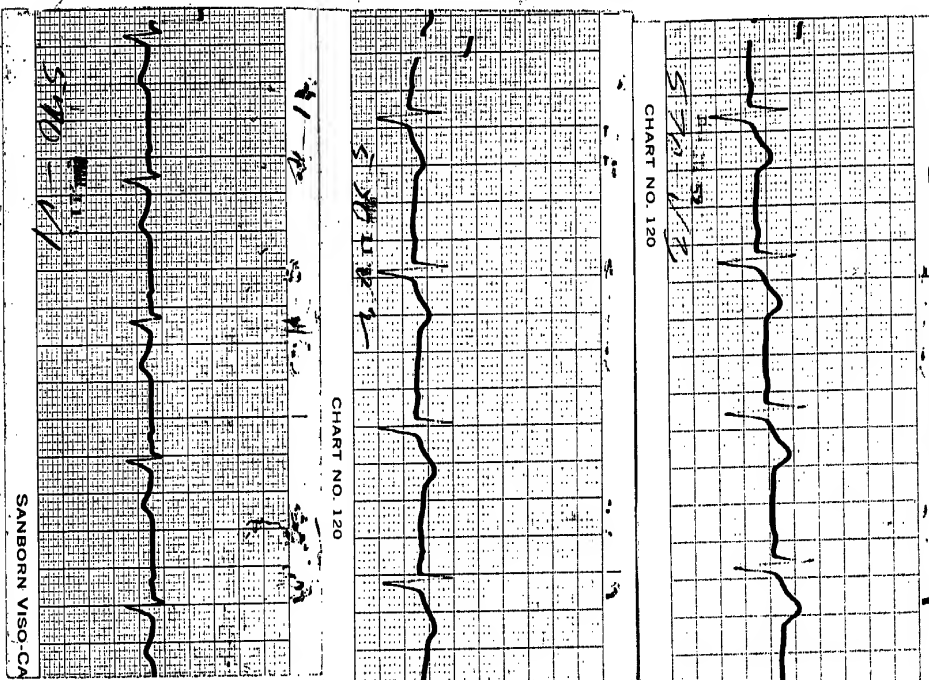
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

<b>CLINICAL RECORD</b>		<b>ELECTROCARDIOGRAPHIC REPORT</b>		PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION			MEDICATION		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.
SIGNATURE OF WARD PHYSICIAN					DATE
RHYTHM NORMAL SINUS RHYTHM			AXIS DEVIATION (QRS) NORMAL		RATES AURIC. VENT. 72
INTERVALS PR .16 QRS .08 QT .36			P WAVES NORMAL		
QRS COMPLEXES					
RS-T SEGMENT			T WAVES		
PRECORDIAL LEADS (Speed/ft)					

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

CONCLUSION: NORMAL E. C. G.

NO. ECG 570	SIGNATURE C. R. SIKES.	TITLE LT. JG. MC. USNR.	DATE 3-11-52
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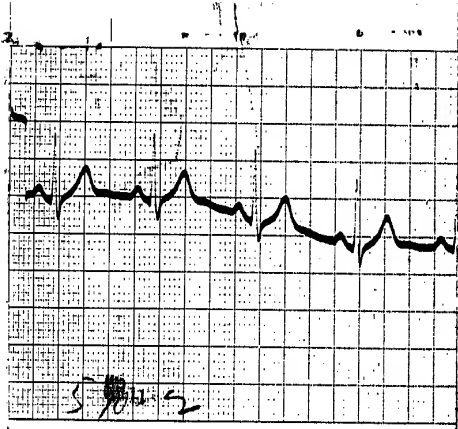


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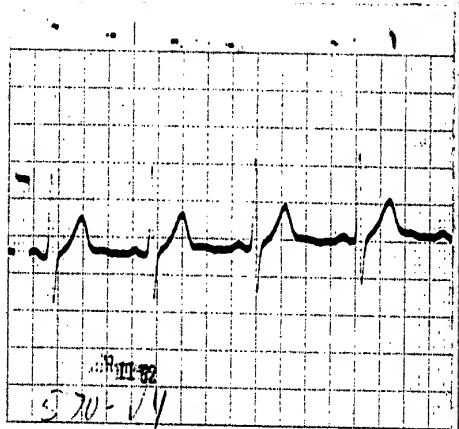
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME BLY HERMAN OL	REGISTER NO.	WARD NO. Staff Clinic
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ELECTROCARDIOGRAPHIC REPORT  
Standard Form 520

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)



ART NO. 120



mapaper

CHART NO

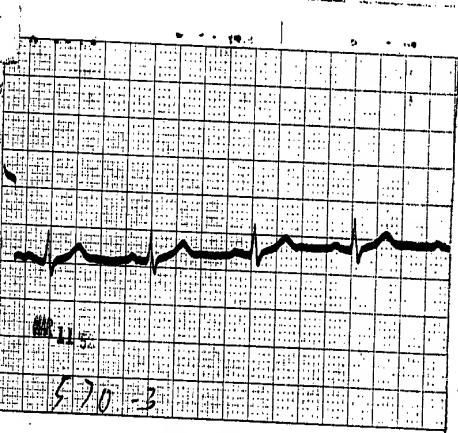
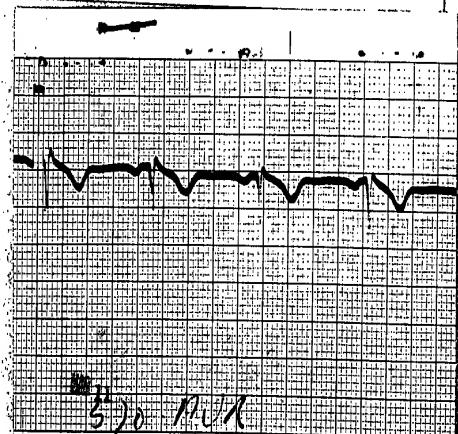
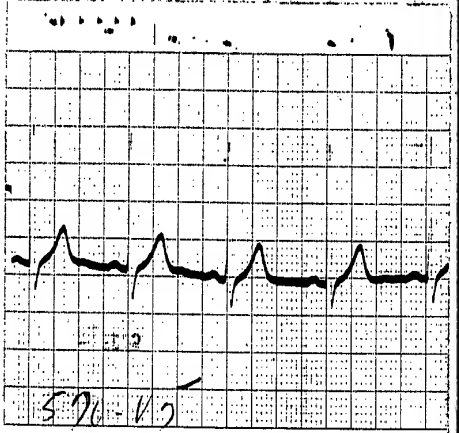
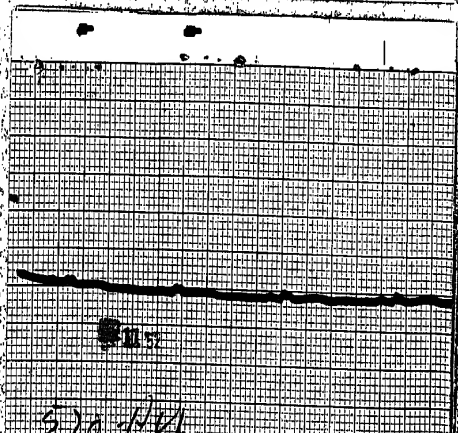
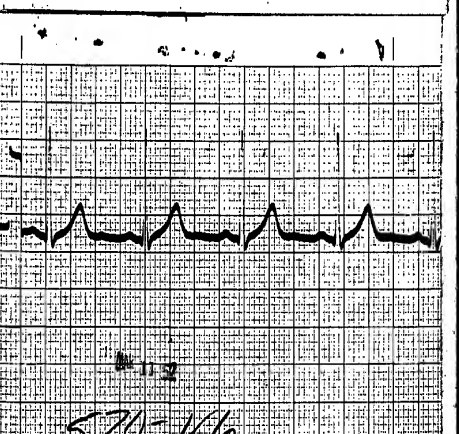


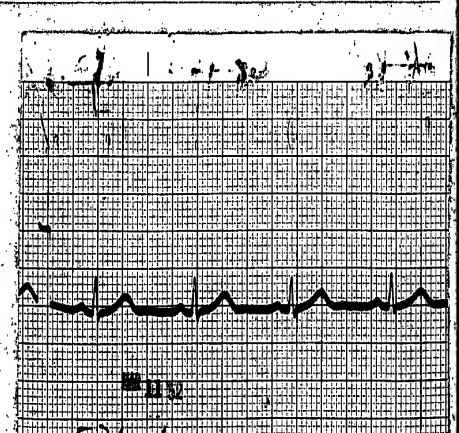
CHART NO. 120



SANBORN VISO-CAL



SAN



mapaper

CHART

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CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
RHYTHM Sinus						AXIS DEVIATION (QRS) Normal		RATES AURIC.    VENT. 70	
INTERVALS PR .16    QRS    QT						P WAVES			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES Up			
PRECARDIAL LEADS (Spec/ly)									

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

CONCLUSION: Within normal limits.

*Handwritten signature*

NO. ECG 570	SIGNATURE <i>M.M. Driskell</i> M .M DRISKELL	TITLE CDR MC USN	DATE 4-12-51
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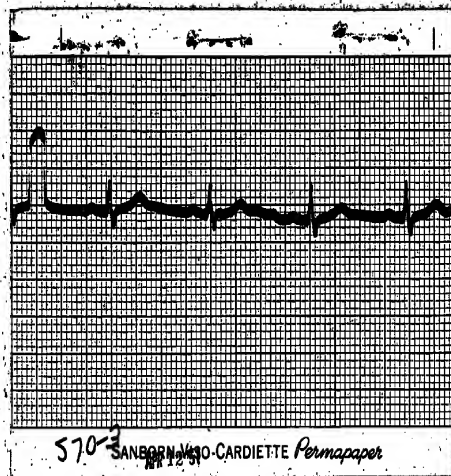
MOUNT TRACINGS HERE

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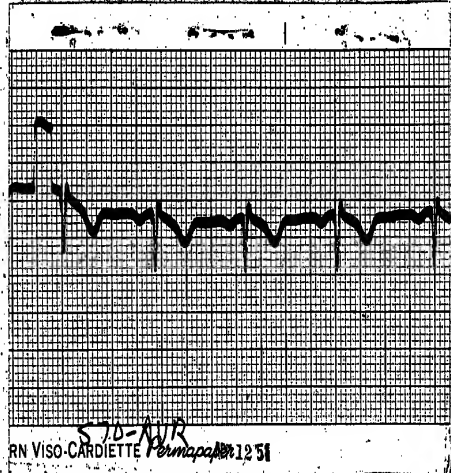
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME			REGISTER NO.	WARD NO.
BLY	Herman	Olin	FBI	101-1

USNH, Bethesda, Md.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

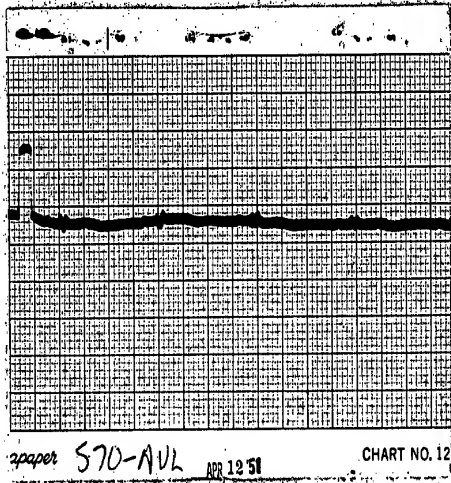
ELECTROCARDIOGRAPHIC REPORT  
Standard Form 530



570-3 SANBORN VISO-CARDIETTE Permapaper

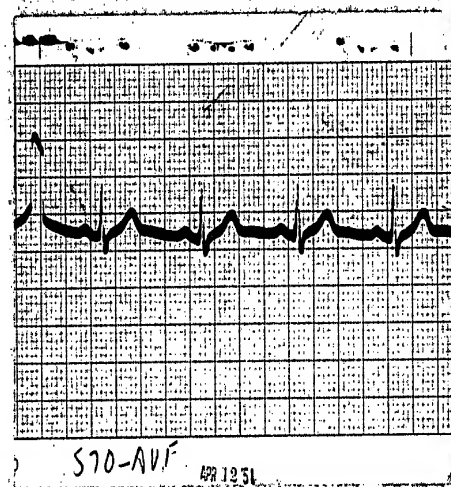


570-AVR  
RN VISO-CARDIETTE Permapaper APR 12 51



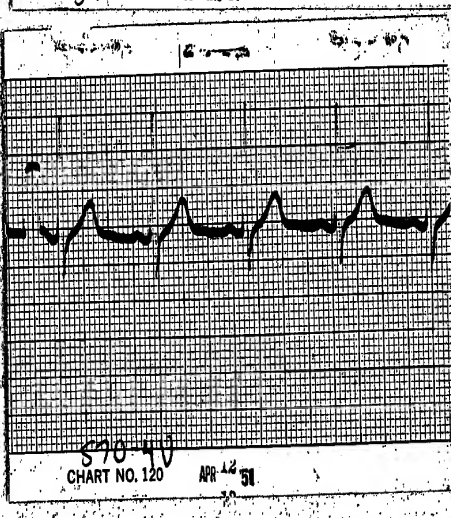
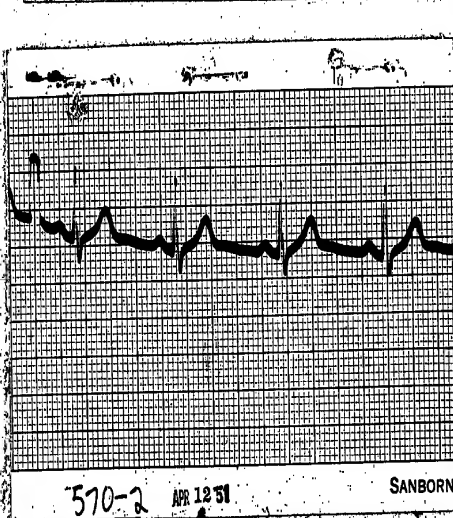
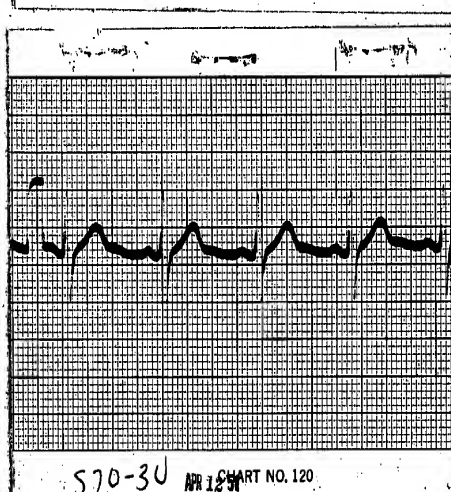
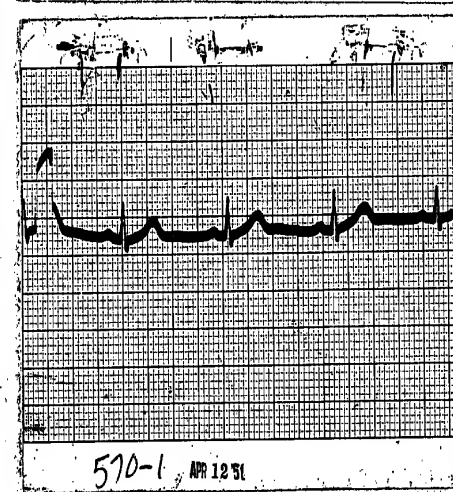
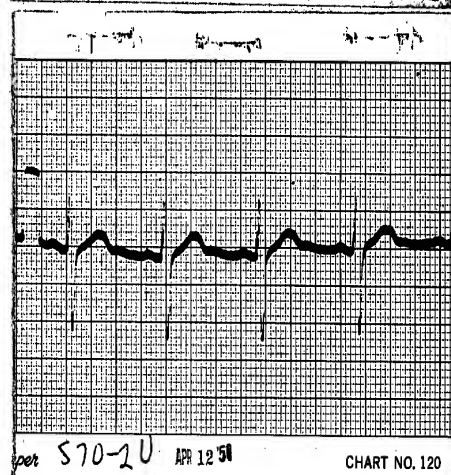
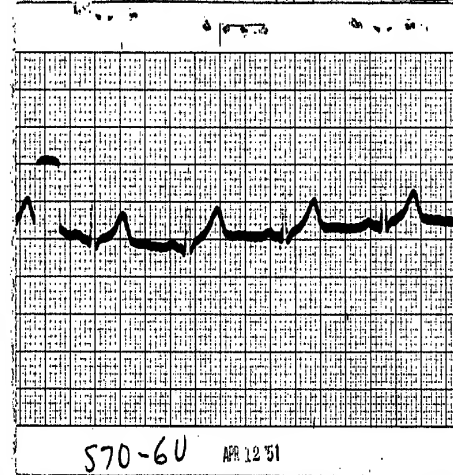
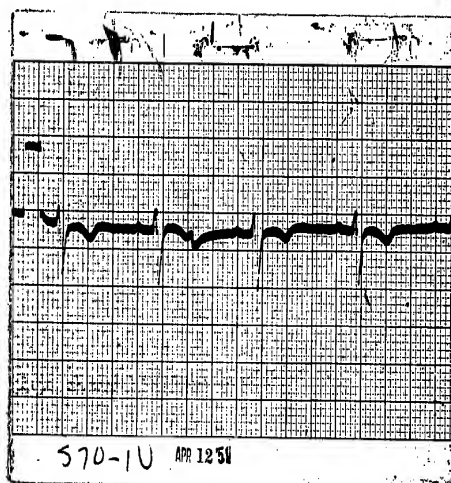
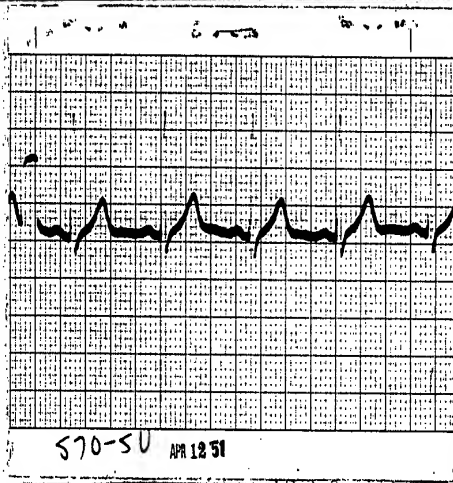
paper 570-AVL APR 12 51

CHART NO. 12



570-AVF APR 12 51

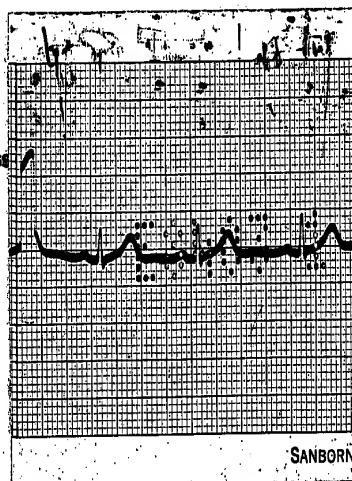
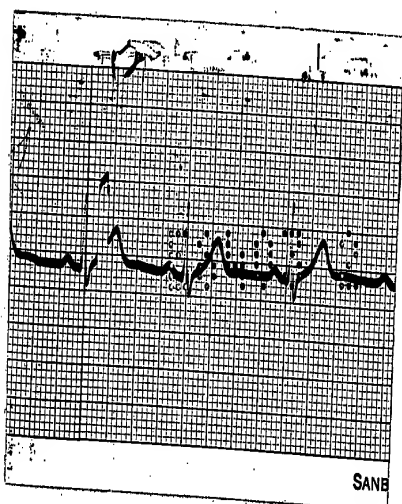






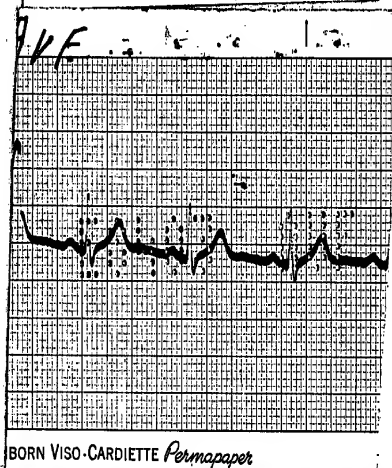
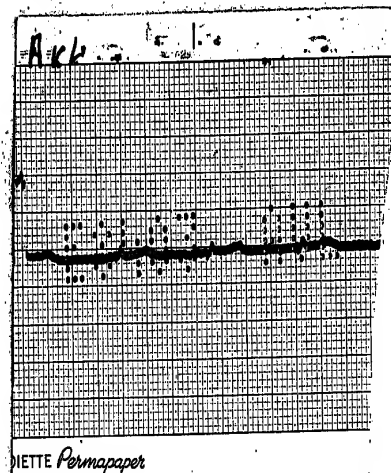
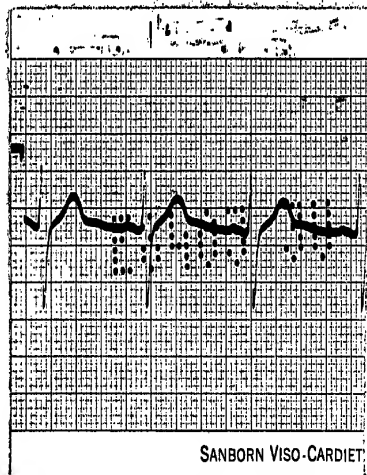
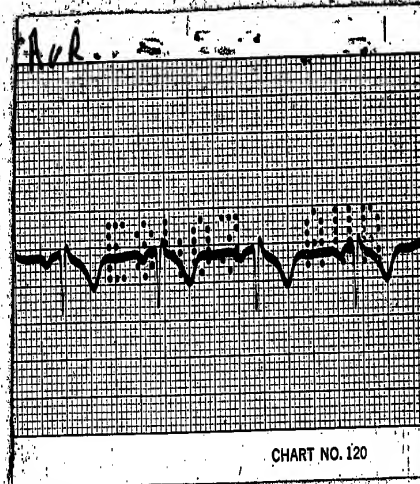
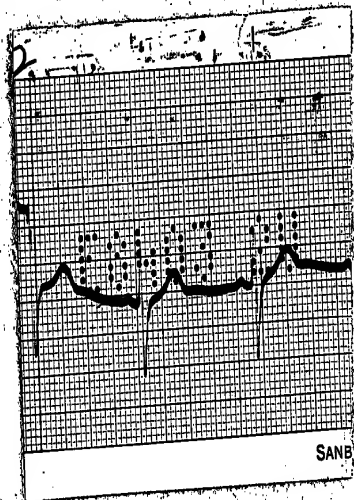
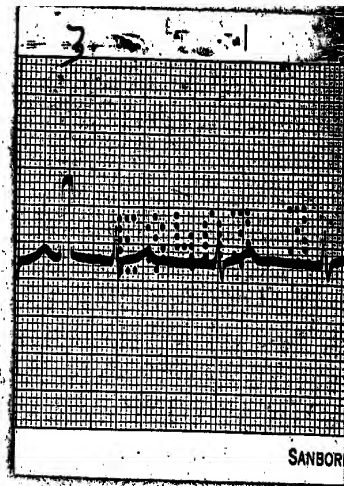
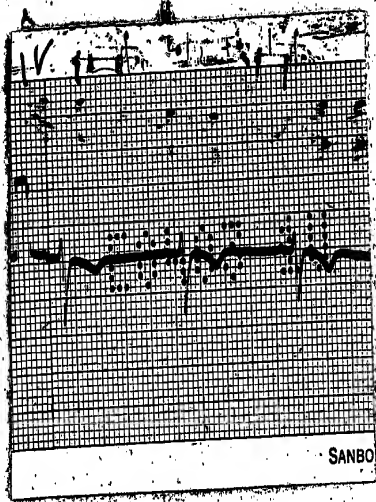
CLINICAL RECORD						ELECTROCARDIOGRAPHIC REPORT		PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN		DATE	
RHYTHM <u>Sinus</u>						AXIS DEVIATION (QRS)		RATES AURIC. <u>70</u> VENT.	
INTERVALS PR <u>.16</u> QRS QT						P WAVES			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
PRECARDIAL LEADS (Specify) Within normal limits. <u>T VL negative</u>									
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS: Conclusion: The record is normal.									

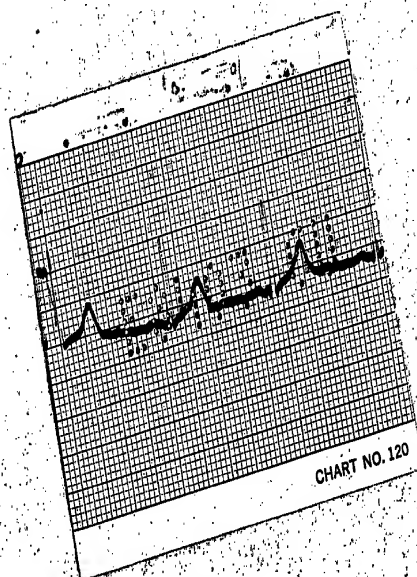
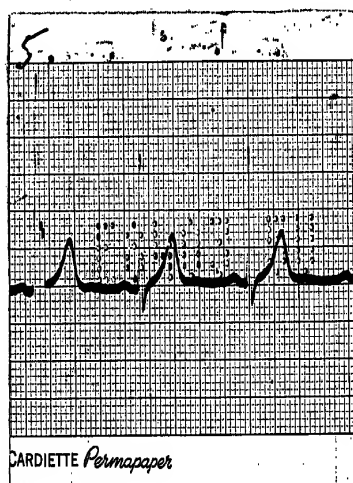
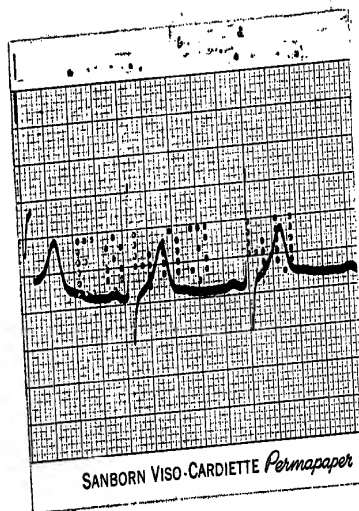
NO. E-8403 SIGNATURE M.M. DRISKELL TITLE CDR MC USN DATE 3-10-50  
 ECG E-8403



(Continue on reverse)

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME <u>RLY, Herman O</u>		REGISTER NO. <u>FBI</u>	WARD NO. <u>101-1</u>
ELECTROCARDIOGRAPHIC REPORT Standard Form 520 (NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)			



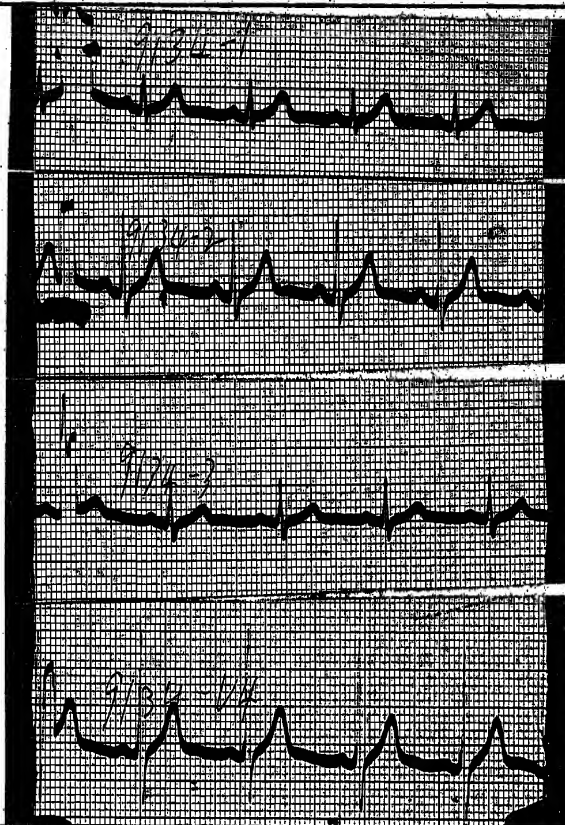


NNMC-172  
(15m)

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

ELECTROCARDIOGRAPH STUDY

Name ELY, Herman O. Rate FBI Age 35 Ward 101  
Diagnosis \_\_\_\_\_ Previous Tests No  
Referred by Dr. White MC, USN(R)



INTERPRETATION

Cardiac No. D-9134

ECG Taken

10-15-48

-223

Rhythm: Sinus.

Rate: 72 per minute.

P Waves:

P-R Interval: .16 seconds.

QRS Occupies:

Q Waves:

Axis Deviation:

S-T Segment:

T Waves: Upright in all leads.

Chest Leads:

Conclusion: Within normal limits.

*[Signature]*  
Comdr. (MC), USN

November 16, 1960

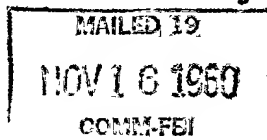
PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am writing to express my sincere appreciation for the highly effective manner in which you performed in connection with a series of field conferences on the development and handling of confidential sources in the security field.

The success achieved in these conferences in that many good suggestions were made and numerous problems were discussed is indeed excellent and can be attributed in no small degree to the very fine manner in which they were organized and carried out. I want to thank you for your valuable contributions.



Sincerely yours,

J. Edgar Hoover

211

1 - Mr. Belmont (Personal Attention)

1 - Miss Usilton (Sent Direct)

Tolson \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Belmont \_\_\_\_\_  
Callahan \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Malone \_\_\_\_\_  
McGuire \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
W.C. Sullivan \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Ingram \_\_\_\_\_  
Gandy \_\_\_\_\_

AFH:rd  
(5)  
67-99243

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NOV 16 9 56 AM '60  
FBI  
RECEIVING ROOM

REPORT OF MEDICAL EXAMINATION

**F.B.I.**

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>HERMAN</b>		2. GRADE AND COMPONENT OR POSITION <b>Special Agent</b>		3. IDENTIFICATION NUMBER	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and state)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>		6. DATE OF EXAMINATION <b>1/9/61</b>	
7. SEX <b>M</b>	8. RACE <b>White</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY	
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>7/12/13</b>			
13. PLACE OF BIRTH <b>VAUCLUSE, VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN			
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NNMC</b>				16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION	
NOR- MAL	ABNOR- MAL
	18. HEAD, FACE, NECK, AND SCALP
	19. NOSE
	20. SINUSES
	21. MOUTH AND THROAT
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)
	23. DRUMS (Perforation)
	24. EYES—GENERAL (Visual acuity and refraction under items 68, 69 and 72)
<b>NE</b>	25. OPHTHALMOSCOPIC
	26. PUPILS (Equality and reaction)
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
	28. LUNGS AND CHEST (Include breasts)
	29. HEART (Thrust, size, rhythm, sounds)
	30. VASCULAR SYSTEM (Varicose veins, etc.)
	31. ABDOMEN AND VISCERA (Include hernia)
	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate, if indicated)
	33. ENDOCRINE SYSTEM
	34. G-U SYSTEM
	35. UPPER EXTREMITIES (Strength, range of motion)
	36. FEET
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)
	38. SPINE, OTHER MUSCULOSKELETAL
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
	40. SKIN, LYMPHATICS <b>V</b>
	41. NEUROLOGIC (Equilibrium tests under item 73)
	42. PSYCHIATRIC (Specify any personality deviation)
	43. PELVIC (Females only) (Check how done)
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

203

*2 ENDOCRINE AT*

*Small indurated area under rt. orbit.*

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth X—Missing teeth XXX—Replaced by dentures (F.X.S.)—Fixed bridge, brackets to include abutments		<i>no dental defects</i>	
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	L E F T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

LABORATORY FINDINGS		46. CHEST X-RAY (Place, date, film number and result)	
45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.005</b>		<b>4532-61 - Normal</b>	
B. ALBUMIN <b>Reg</b>	D. MICROSCOPIC <b>Reg</b>		
C. SUGAR <b>Reg</b>	48. EKG <b>WNL</b>	49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		50. OTHER TESTS	

*Reg 12*

5'10" (146-161) medium

MEASUREMENTS AND OTHER FINDINGS									
51. HEIGHT 70	52. WEIGHT 156	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: <input type="checkbox"/> SLENDER <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE	56. TEMPERATURE 98.6				
57. BLOOD PRESSURE (Arm at heart level)			58. PULSE (Arm at heart level)						
A. SITTING SYS. 118 DIA. 70	B. RECUMBENT SYS. DIA.	C. STANDING (3 min.) SYS. DIA.	A. SITTING 84	B. AFTER EXERCISE	C. 2 MIN. AFTER				
59. DISTANT VISION			60. REFRACTION						
RIGHT 20/20	CORR. TO 20/	BY S.	OX	61. 75m NEAR VISION					
LEFT 20/20	CORR. TO 20/	BY S.	OX	20/16 CORR. TO BY					
62. METROPHORIA (Specify distance)									
ES°	EX°	R. H.	L. H.	PRISM DIV.	PRISM CONV. CT				
63. ACCOMMODATION RIGHT LEFT		64. COLOR VISION (Test used and result) AOC-1946 18/18		65. DEPTH PERCEPTION (Test used and score) UNCORRECTED CORRECTED					
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)		68. RED LENS TEST					
69. INTRAOCULAR TENSION		70. HEARING							
RIGHT WV /15 SV /15		71. AUDIOMETER							
LEFT WV 15 /15 SV 15 /15		72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)							

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

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JAN 24 2 48 PM '61

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)	76. A. PHYSICAL PROFILE					
	P	U	L	H	E	S
77. EXAMINEE (Check) A. <input type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR	B. PHYSICAL CATEGORY					
	A	B	C	E		
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						
79. TYPED OR PRINTED NAME OF PHYSICIAN E. B. JOHNSON, CAPT, MC, USA	SIGNATURE E. B. Johnson					
80. TYPED OR PRINTED NAME OF PHYSICIAN	SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)	SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY	SIGNATURE					

NUMBER OF ATTACHED SHEETS

# REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS



1. LAST NAME—FIRST NAME—MIDDLE NAME

BLY HERMAN OLIN

2. GRADE AND COMPONENT OR POSITION

Special Agent

IDENTIFICATION NO.

11961

3. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)

4. PURPOSE OF EXAMINATION

ANNUAL

DATE OF EXAMINATION

11/9/61

5. SEX

M

6. RACE

White

9. TOTAL YRS. GOVT. SERVICE

MILITARY

CIVILIAN

10. DEPARTMENT, AGENCY, OR SERVICE

11. ORGANIZATION UNIT

12. DATE OF BIRTH

7/12/13

13. PLACE OF BIRTH

VAUCLUSE, VIRGINIA

14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS

16. OTHER INFORMATION

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

Very good (for age 47)

## 18. FAMILY HISTORY

RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER	<u>38</u>		<u>Cerebral Hem.</u>	<u>51</u>			HAD TUBERCULOSIS	
MOTHER			<u>Heart - Pneumonia</u>	<u>77</u>			HAD SYPHILIS	
SPOUSE	<u>54</u>	<u>Good</u>					HAD DIABETES	
	<u>53</u>	<u>Good</u>					HAD CANCER	
BROTHERS	<u>45</u>	<u>Good</u>					HAD KIDNEY TROUBLE	
AND	<u>43</u>	<u>V. Good</u>					HAD HEART TROUBLE	
SISTERS							HAD STOMACH TROUBLE	
							HAD RHEUMATISM (Arthritis)	
CHILDREN							HAD ASTHMA, HAY FEVER, HIVES	
							HAD EPILEPSY (Fits)	
							COMMITTED SUICIDE	
							BEEN INSANE	

19. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES

20. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER -

<input checked="" type="checkbox"/>	BEEN PREGNANT	AGE AT ONSET OF MENSTRUATION
<input checked="" type="checkbox"/>	HAD A VAGINAL DISCHARGE	INTERVAL BETWEEN PERIODS
<input checked="" type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	DURATION OF PERIODS
<input checked="" type="checkbox"/>	HAD PAINFUL MENSTRUATION	DATE OF LAST PERIOD
<input checked="" type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY <input checked="" type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY

B. COMPLETE THE FOLLOWING

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

One

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

MONTHS

25. WHAT IS YOUR USUAL OCCUPATION?

Special Agent

26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED



YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF:
	<input checked="" type="checkbox"/>	A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
	<input checked="" type="checkbox"/>	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
	<input checked="" type="checkbox"/>	33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
	<input checked="" type="checkbox"/>	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
<input checked="" type="checkbox"/>		35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
	<input checked="" type="checkbox"/>	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
	<input checked="" type="checkbox"/>	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge; whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

Removal of tonsils 1937  
Removal of colon fissure 1954  
Removal of appendix 1959

For appendix Dr. Theodore Coleman  
Doctors Hospital  
Wash. DC

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

SIGNATURE

Herman O. Bly

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 27 thru 39)

No stomach distress since appendectomy  
Pain in chest recently - seemed associated w/ gas - no return

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

SIGNATURE

NUMBER OF ATTACHED SHEETS

G. B. JOHNSTON, CAPT, MC, US.

JUN 9 '51

G. B. Johnston

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee BLY HERMAN OLIN  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	62
3	65
4	67
9	68
11	69
14	72
17	76

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible.

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

If examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☐ No *NR*

67-99 243-212

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☒ medium ☐ large

4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☐ Satisfactory ☐ Excessive ☐ Deficient

5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_  
 \_\_\_\_\_

*G. R. Johnston*  
 (Signature of Medical Examiner)

JAN 17 1961  
 (Date)

December 12, 1960

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am indeed pleased to commend you for the outstanding attitude you exhibited in reporting for duty today despite the extremely hazardous travel conditions.

You demonstrated a most exemplary devotion to the work of the FBI in considering your services so essential that, in spite of an announcement that all Federal Government agencies would be closed, you reported for duty. I certainly appreciate your dedicated efforts and I want you to know I have instructed that a copy of this letter be placed in your personnel file.

Sincerely yours,

J. Edgar Hoover

lson \_\_\_\_\_  
hr \_\_\_\_\_  
sons \_\_\_\_\_  
lmont \_\_\_\_\_  
llahan \_\_\_\_\_  
Loach \_\_\_\_\_  
lone \_\_\_\_\_  
Guire \_\_\_\_\_  
sen \_\_\_\_\_  
am \_\_\_\_\_  
tter \_\_\_\_\_  
Sullivan \_\_\_\_\_  
e. Room \_\_\_\_\_  
am \_\_\_\_\_  
dy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

## REPORT OF MEDICAL EXAMINATION

**FBI**  
IDENTIFICATION NO.

1. LAST NAME—FIRST NAME—MIDDLE NAME (Type or print) <b>BLY HERMAN O.</b>		2. GRADE AND COMPONENT OR POSITION <b>SA</b>		IDENTIFICATION NO. <b>1.D.1.</b>	
3. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>		6. DATE OF EXAMINATION <b>11/24/61</b>	
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>7/12/13</b>		13. PLACE OF BIRTH <b>VAUCLUSE, VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NAME</b>				16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION		
NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR- MAL
	18. HEAD, FACE, NECK, AND SCALP	
	19. NOSE	
	20. SINUSES	
	21. MOUTH AND THROAT	
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
	23. DRUMS (Percussion)	
	24. EYES—GENERAL (Visual acuity and refraction under items 68, 69 and 72)	
NE	25. OPHTHALMOLOGIC	
	26. PUPILS (Equality and reaction)	
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
	28. LUNGS AND CHEST (Include breasts)	
	29. HEART (Throat, size, rhythm, sounds)	
	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN, LYMPHATICS	
	41. NEUROLOGIC (Equilibrium tests under item 73)	
	42. PSYCHIATRIC (Specifics and personality deviation)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

**NOTES.** (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

→ Pivotal small

REC-146

99243-215

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)

	X - Missing teeth XXX - Replaced by dentures								(6 X N) - Fixed bridge, brackets to include abutments							
	Restorable teeth								Nonrestorable teeth							
U P E R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
L O W E R	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES  
no dental defects

### LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN	D. MICROSCOPIC	4532-61 See report	
C. SUGAR			
47. SEROLOGY (Specify test used and result)	48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
Neg.	Neg.	There has not been any.	

Change sin  
1-10-61.

MEASUREMENTS AND OTHER FINDINGS									
51. HEIGHT 70	52. WEIGHT 153	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: <input type="checkbox"/> SLENDER <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			56. TEMPERATURE 98		
57. BLOOD PRESSURE (Arm at heart level)					58. PULSE (Arm at heart level)				
A. SITTING SYS. 124 DIAS. 78		B. RECUMBENT SYS. DIAS.		C. STANDING (8 min.) SYS. DIAS.		A. SITTING 88		B. AFTER EXERCISE	
59. DISTANT VISION		60. REFRACTION		61. 75m		NEAR VISION			
RIGHT 20/20		CORR. TO 20/		BY S. OX		20/8		CORR. TO BY	
LEFT 20/20		CORR. TO 20/		BY S. OX		20/8		CORR. TO BY	
62. METEOPHORIA (Specify distance)									
ES°		EX°		R. H.		L. H.		PRISM DIV.	
PRISM CONV.		PC		PD					
63. ACCOMMODATION		64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED	
RIGHT LEFT		40C-1940 18/18						CORRECTED	
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)				68. RED LENS TEST		69. INTRAOCULAR TENSION	
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)	
RIGHT WV 15 /15 SV 15 /15		250 500 1000 2000 3000 4000 6000 8000							
LEFT WV 15 /15 SV 15 /15		RIGHT LEFT							
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY									

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

REC'D - ADMIN. DIV.  
FBI  
JUN 20 9 55 AM '61

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)		76. A. PHYSICAL PROFILE	
		P U L H E S	
77. EXAMINEE (Check)			
A. <input checked="" type="checkbox"/> IS QUALIFIED FOR		B. PHYSICAL CATEGORY	
B. <input type="checkbox"/> IS NOT QUALIFIED FOR			
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER		A B C E	
79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
		G. R. M. Zacher	
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE	
		NUMBER OF ATTACHED SHEETS	

# REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

# F.B.I.

1. LAST NAME-FIRST NAME-MIDDLE NAME <b>BLY, HERMAN OLIN</b>			2. GRADE AND COMPONENT OR POSITION <b>Special Agent</b>		IDENTIFICATION NUMBER
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State) <b>Arlington, Va</b>			5. PURPOSE OF EXAMINATION <b>Annual</b>		6. DATE OF EXAMINATION <b>11/24/61</b>
7. SEX <b>MALE</b>	8. RACE <b>WHITE</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN <b>21</b>		10. AGENCY <b>781</b>	11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>7/12/13</b>		13. PLACE OF BIRTH <b>VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN <b>MARTHA B. BLY WIFE</b> <b>2315 N. MONROE ST ARLINGTON, VA.</b>	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>U. S. Naval Hospital, Bethesda, Md.</b>			16. OTHER INFORMATION		

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

*Very good*

18. FAMILY HISTORY.					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:			
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER	-	Deceased	Ca. leukemia 9	51		✓	HAD TUBERCULOSIS	
MOTHER	-	Deceased	pneumonia - heart	77 1/2		✓	HAD SYPHILIS	
SPOUSE	55	good			✓		HAD DIABETES	mother
	54	good				✓	HAD CANCER	
BROTHERS	46	good				✓	HAD KIDNEY TROUBLE	
AND	44	good			✓		HAD HEART TROUBLE	mother
SISTERS						✓	HAD STOMACH TROUBLE	
					✓		HAD RHEUMATISM (Arthritis)	wife
CHILDREN	none					✓	HAD ASTHMA, HAY FEVER, HIVES	
						✓	HAD EPILEPSY (Fits)	
						✓	COMMITTED SUICIDE	
						✓	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
✓		SCARLET FEVER, ERYSIPELAS	✓		GOITER	✓		TUMOR, GROWTH, CYST, CANCER	✓		"TRICK" OR LOCKED KNEE
✓		DIPHTHERIA	✓		TUBERCULOSIS	✓		RUPTURE	✓		FOOT TROUBLE
✓		RHEUMATIC FEVER	✓		SOAKING SWEATS (Night sweats)	✓		APPENDICITIS	✓		NEURITIS
✓		SWOLLEN OR PAINFUL JOINTS	✓		ASTHMA	✓		PILES OR RECTAL DISEASE	✓		PARALYSIS (Inc. infantile)
✓		MUMPS	✓		SHORTNESS OF BREATH	✓		FREQUENT OR PAINFUL URINATION	✓		EPILEPSY OR FITS
✓		WHOOPING COUGH	✓		PAIN OR PRESSURE IN CHEST	✓		KIDNEY STONE OR BLOOD IN URINE	✓		CAR, TRAIN, SEA, OR AIR SICKNESS
✓		FREQUENT OR SEVERE HEADACHE	✓		CHRONIC COUGH	✓		SUGAR OR ALBUMIN IN URINE	✓		FREQUENT TROUBLE SLEEPING
✓		DIZZINESS OR FAINTING SPELLS	✓		PALPITATION OR POUNDING HEART	✓		BOILS	✓		FREQUENT OR TERRIFYING NIGHTMARES
✓		EYE TROUBLE	✓		HIGH OR LOW BLOOD PRESSURE	✓		VENEREAL DISEASE	✓		DEPRESSION OR EXCESSIVE WORRY
✓		EAR, NOSE OR THROAT TROUBLE	✓		CRAMPS IN YOUR LEGS	✓		RECENT GAIN OR LOSS OF WEIGHT	✓		LOSS OF MEMORY OR AMNESIA
✓		RUNNING EARS	✓		FREQUENT INDIGESTION	✓		ARTHRITIS OR RHEUMATISM	✓		BED WETTING
✓		CHRONIC OR FREQUENT COLDS	✓		STOMACH, LIVER OR INTESTINAL TROUBLE	✓		BONE, JOINT, OR OTHER DEFORMITY	✓		NERVOUS TROUBLE OF ANY SORT
✓		SEVERE TOOTH OR GUM TROUBLE	✓		GALL BLADDER TROUBLE OR GALL STONES	✓		LAMENESS	✓		ANY DRUG OR NARCOTIC HABIT
✓		SINUSITIS	✓		JAUNDICE	✓		LOSS OF ARM, LEG, FINGER, OR TOE	✓		EXCESSIVE DRINKING HABIT
✓		HAY FEVER	✓		ANY REACTION TO SERUM, DRUG OR MEDICINE	✓		PAINFUL OR "TRICK" SHOULDER OR ELBOW	✓		HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (Check each item)

✓	WORN GLASSES
✓	WORN AN ARTIFICIAL EYE
✓	WORN HEARING AIDS
✓	STUTTERED OR STAMMERED
✓	WORN A BRACE OR BACK SUPPORT

✓	ATTEMPTED SUICIDE
✓	BEEN A SLEEP WALKER
✓	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
✓	COUGHED UP BLOOD
✓	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER—

	BEEN PREGNANT
	HAD A VAGINAL DISCHARGE
	BEEN TREATED FOR A FEMALE DISORDER
	HAD PAINFUL MENSTRUATION
	HAD IRREGULAR MENSTRUATION

B. COMPLETE THE FOLLOWING:

	AGE AT ONSET OF MENSTRUATION
	INTERVAL BETWEEN PERIODS
	DURATION OF PERIODS
	DATE OF LAST PERIOD
QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS

25. WHAT IS YOUR USUAL OCCUPATION?

26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED

67-99243-25

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
		27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF:
	✓	A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	✓	B. INABILITY TO PERFORM CERTAIN MOTIONS
	✓	C. INABILITY TO ASSUME CERTAIN POSITIONS
	✓	D. OTHER MEDICAL REASONS (If yes, give reasons)
	✓	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	✓	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	✓	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
	✓	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
✓		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
	✓	33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
✓		34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
	✓	35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
	✓	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
	✓	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	✓	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	✓	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

*Tonsils 1937 Removal of appendix 1954  
appendicitis 1958*

*Strep throat 1937*

*See 32*

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

*HERMAN O. Bly*

SIGNATURE

*Herman O. Bly*

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 28 thru 39)

*Hea sl. & in stream, nocturia x 2*

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

SIGNATURE

NUMBER OF ATTACHMENTS



★ U. S. GOVERNMENT PRINTING OFFICE: 1960 542574

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO. STAFF CLNC
ELY, Herman O. F.B.I.	AGE SEX	(Check one) <input type="checkbox"/> BEGSIDE, WHEELCHAIR, OR STRETCHER <input type="checkbox"/> BED PATIENT <input type="checkbox"/> AMBULATORY	
EXAMINATION REQUESTED			
REQUESTED BY		DATE OF REQUEST	

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

FILM NO. 4532	DATE OF REPORT
---------------	----------------

RADIOGRAPHIC REPORT

24 NOV 1961

CHEST: The cardiac shadow and lung fields are normal. Projecting laterally from the lateral aspect of the left fifth rib is a bony prominence. This appears to be unchanged from films dating back to 1959. The appearance is most suggestive of an osteochondroma; fibrous dysplasia may be a possibility. There is a minimal scoliosis to the right in the mid thorax. This too is unchanged from the earlier films. No other specific abnormality is demonstrated. JSG:pas

Department of Radiology  
U.S. Naval Medical Center  
National Naval Medical Center  
Bethesda 14, Maryland

J. S. GARRISON, III  
LCDR, MC USN

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

Standard Form 519A (Rev. Aug 1954)  
Promulgated by Bureau of the Budget  
Circular A. 30 (Rev.)

RADIOGRAPHIC REPORT  
519-205

47 89243

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee  
(Type or print)

Bly, Herman O.  
Last First Middle

The following portions of the attached examination report form need not be completed:

2	62
3	65
4	67
9	68
11	69
14	72
17	76

- 46. Is necessary unless facilities for affording same are not readily available.
- 48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
- 49. Is necessary unless facilities for affording same are not readily available.
- 71. Audiometer examinations should be afforded whenever possible.

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

If examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☐ No

67-99243-215

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☒ medium ☐ large
4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient
5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

G. R. Mcadden  
 (Signature of Medical Examiner)

24 Nov. 1941  
 (Date)

<b>CLINICAL RECORD</b>		<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION				MEDICATION		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE 49	SEX M	RACE W	HEIGHT 5-10	WEIGHT 145	B P	SIGNATURE OF WARD PHYSICIAN 10/30/62@1035	DATE
RHYTHM normal sinus				AXIS DEVIATION (QRS) 0		RATES AURIC. VENT. 72	
INTERVALS PR .14 QRS .08 QT .36				P WAVES normal			
QRS COMPLEXES n <sup>1</sup> V1-V2							
RS-T SEGMENT normal				T WAVES normal			
UNIPOLAR EXTREMITY LEADS (Specify)							

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

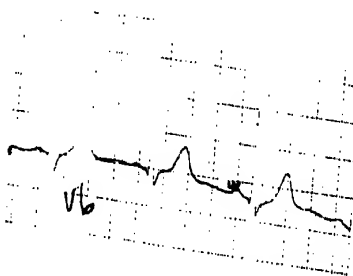
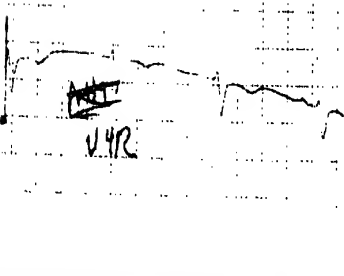
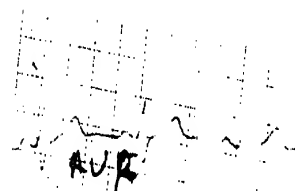
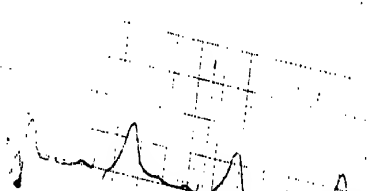
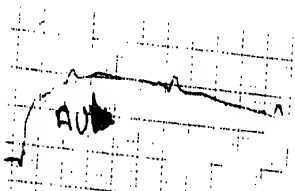
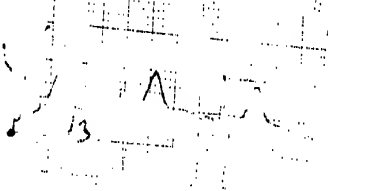
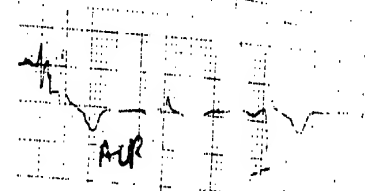
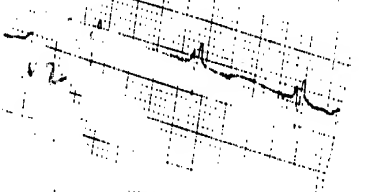
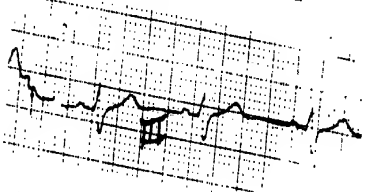
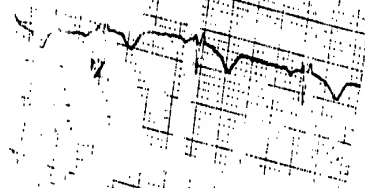
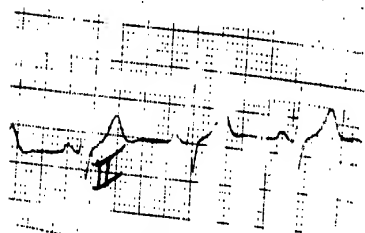
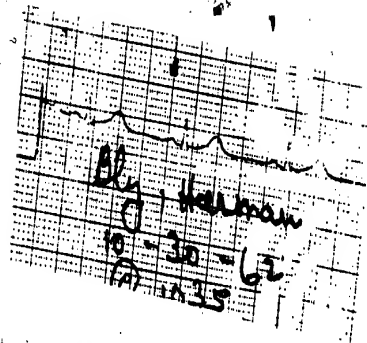
1. Within normal limits
2. No significant change since 1/9/61

(Continue on reverse)

NO. ECG 17897	SIGNATURE J. BRACKETT/js	TITLE LT MC USN	DATE 10/31/62
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility) BLY HERMAN O FBI		REGISTER NO.	WARD NO. ST CL

U. S. NAVAL HOSPITAL  
CARDIOLOGY DEPT.  
BETHESDA, MARYLAND

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
520-104  
(Attach tracings to S. F. 507)



CLINICAL RECORD		CONSULTATION SHEET	
REQUEST			
TO: <i>Dermatology</i>	FROM: <i>Staff Clinic</i>	DATE OF REQUEST <i>6/20/62</i>	
REASON FOR REQUEST (Complaints and findings)			

*Please view the numerous  
fragmented areas & advise. Most have rapidly  
improved post 6 months. Thank.*

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE <i>L. P. Kirkpatrick</i>	APPROVED <i>L. P. KIRKPATRICK</i> CAPT. MC USN	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ON CALL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> ROUTINE
CONSULTATION REPORT			

*11-6-62 @ 11:15  
194/0 Patient has multiple sebaceous keratosis  
on torso, most mildly pigmented. They  
will be removed in the future & sent to  
Scraping. Prognosis, 1/2 strength, 30 D  
30 gm.*

*11/28/62 - Sebaceous keratosis  
removed from at Inguinal  
region by SAC Under 1700000000.*

SIGNATURE AND TITLE <i>Prognosis: good full strength 30 gm</i>	(Continued on reverse side)	
PATIENT'S IDENTIFICATION (For typed or written entries give: Name-last, first, middle; grade; date; hospital or medical facility)	IDENTIFICATION NO.	ORGANIZATION
REGISTER NO.	WARD NO.	

*BLY, Heaman Olin*

*10*

*SA-FBI*

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
40	M		5-10	152					11/24/61 1030
RHYTHM						AXIS DEVIATION (QRS)		RATE	
Normal						25		56	
INTERVALS						P WAVES		AURIC. VENT.	
PR 0.16 QRS 0.08 QT						Normal			
QRS COMPLEXES									
Normal									
RS-T SEGMENT						T WAVES			
Normal									
UNIPOLAR EXTREMITY LEADS (Specify)						Normal			
PRECARDIAL LEADS (Specify)									

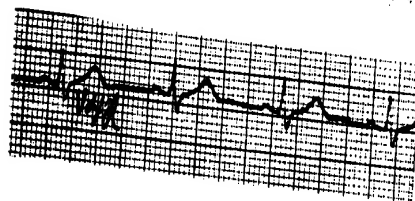
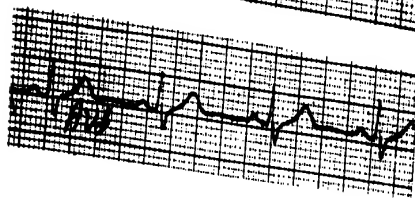
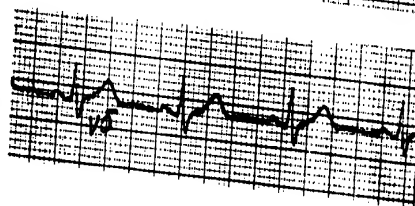
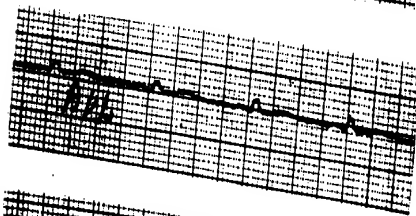
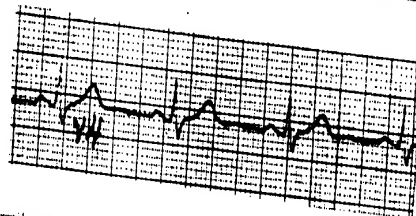
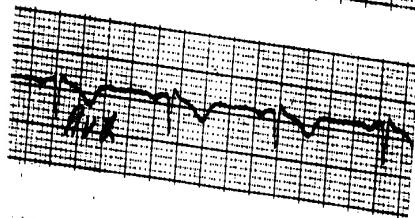
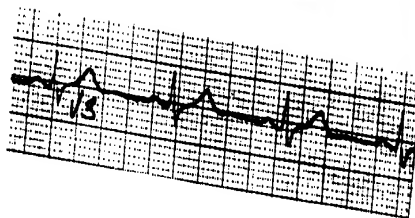
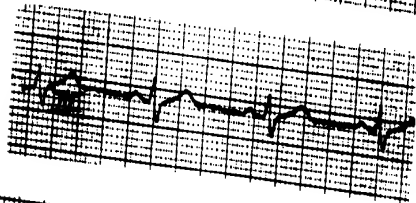
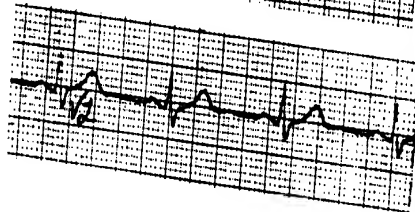
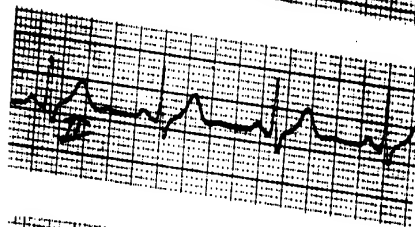
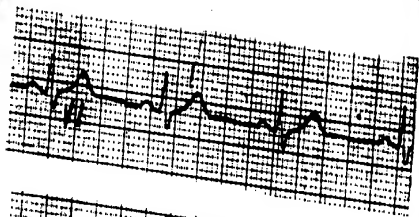
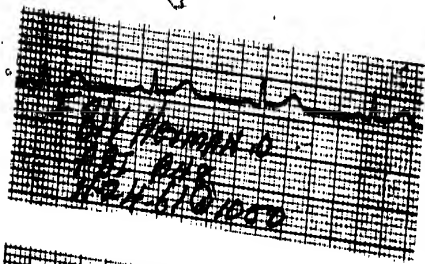
SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. All precordial leads are AVF. Limb leads are normal and there has not been any change since 10/61

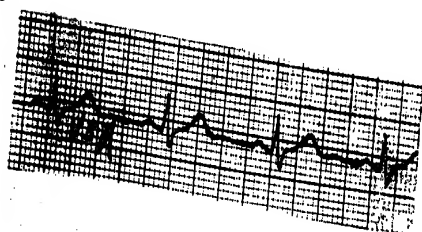
(Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG			
PATIENT'S IDENTIFICATION (For typed or written name: last, first, middle, grade; date; hospital or medical facility)		LT REGISTER NO.	WARD NO.
10 USNH NMHC BETHLEHEM, PA, MD			5/51

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)



10





<b>CLINICAL RECORD</b>				<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION				MEDICATION				<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN		DATE	
17	M		5-10	152		Dr. Johnston		1/9/61 @ 1045	
RHYTHM				AXIS DEVIATION (QRS)				RATES	
Normal sinus				plus 15				AURIC. VENT. 75	
INTERVALS				P WAVES					
PR .16 QRS .08 QT .40				Normal					
QRS COMPLEXES				T WAVES					
Normal				Normal					
RS-T SEGMENT									
Normal									
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

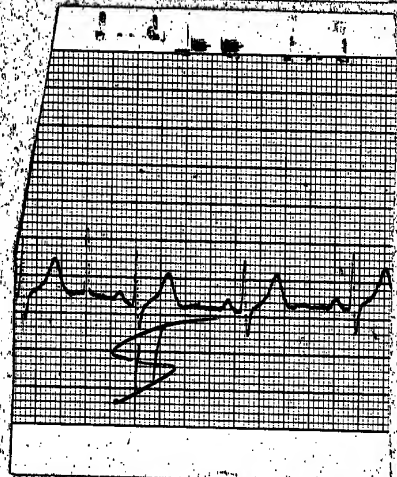
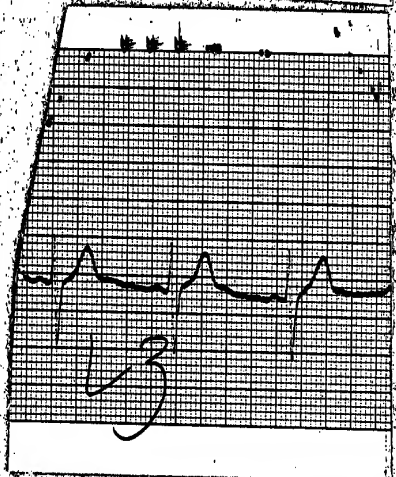
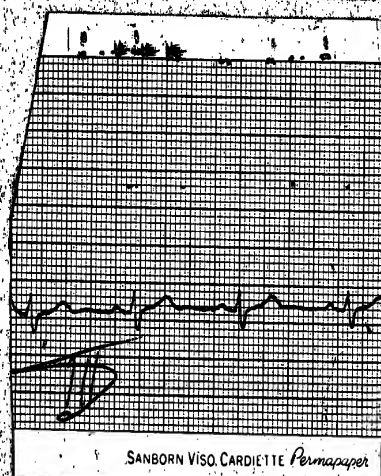
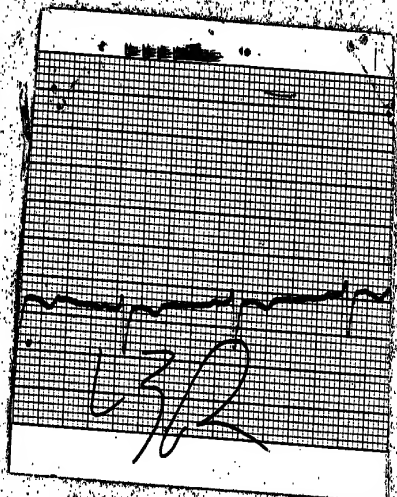
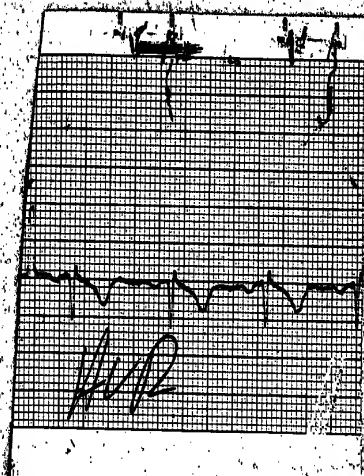
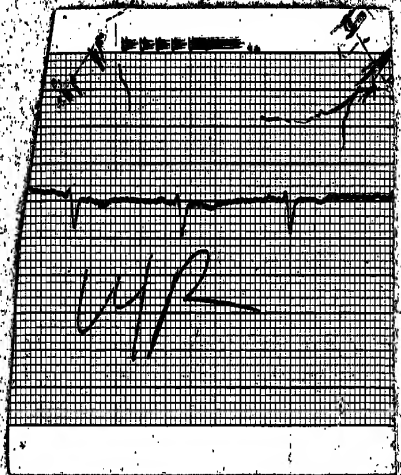
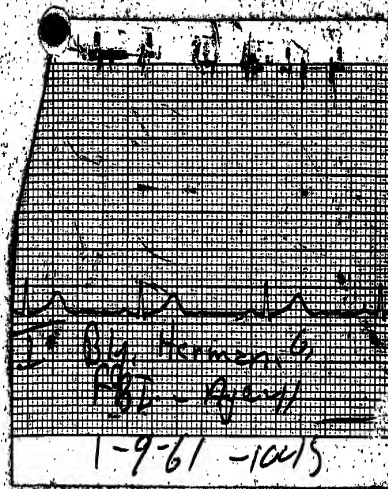
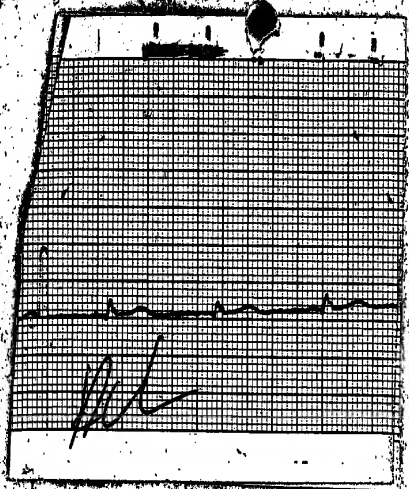
1. Within normal limits

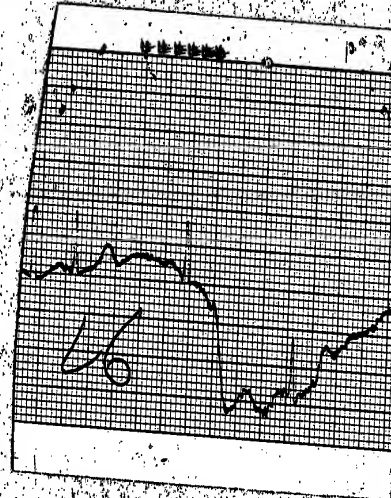
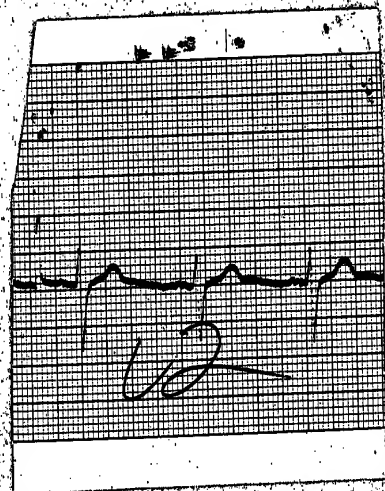
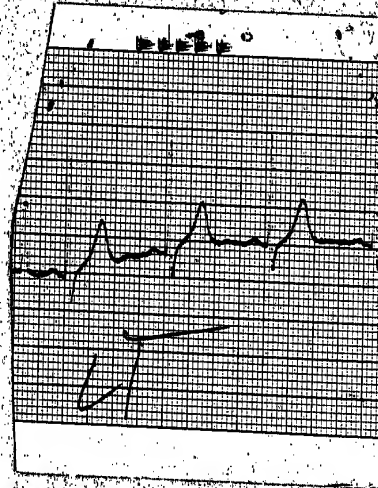
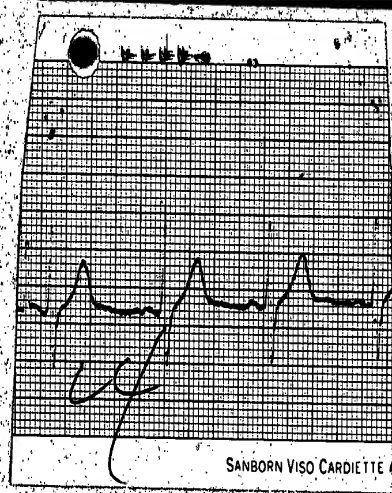
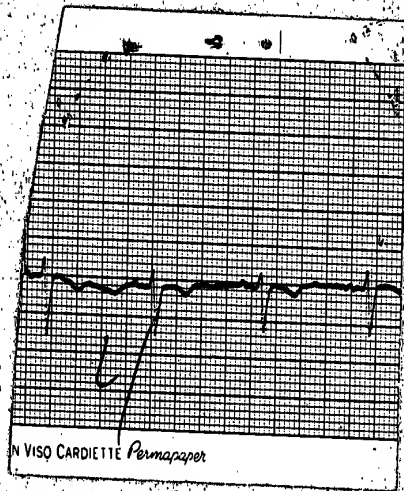
(Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG 17897	V.N. HOUK/js	LCDR MC USN	1/10/61
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
			Staff CL

ELY HERMAN OLIN FBI  
USNH NMHC BETHSEDA, MD

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)





CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: <i>Dermatology</i>	FROM: (Requesting ward, unit, or activity) <i>Staff Clinic</i>	DATE OF REQUEST <i>10/30/62</i>
------------------------	--	---------------------------------

REASON FOR REQUEST (Complaints and findings)

*Please view the numerous  
pigmented lesions. Some of the recently  
removed just 6 months  
prior.*

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE <i>[Signature]</i>	APPROVED <i>L. P. KIRKPATRICK</i> CAPT. MC USN	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ON CALL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> ROUTINE
---------------------------------------	--	--	--

CONSULTATION REPORT

*11-6-62 @ 11:15*

*14/1 Patient has multiple sebaceous keratosis  
also most mildly pigmented. They  
will be removed in the future without  
surgery. Pigmented lesion 5 D  
30 pm.*

*Amnio*

*11/28/62 - Sebaceous keratosis  
removed from at Surgend  
request by DAC Under 11/1/62*

(Continued on reverse side)

SIGNATURE AND TITLE <i>Pigmented lesion full strength 30 pm</i>	IDENTIFICATION NO.	ORGANIZATION <i>Asst</i>
PATIENT'S IDENTIFICATION (For typed or written entries give: Name-last, first, middle; grade; date; hospital or medical facility)	REGISTER NO.	WARD NO. <i>2/1 pm</i>

*21 67*  
*Heoman Olin*

*SA- FBI*

CONSULTATION SHEET

Standard Form 513

Please Return Copy  
to Staff Clinic  
For Our Records

REPORT OF MEDICAL EXAMINATION

F.B.I.

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>BY HERMAN O.</b>		2. GRADE AND COMPONENT OR POSITION <b>S.A.</b>	IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		3. PURPOSE OF EXAMINATION <b>ANNUAL</b>	5. DATE OF EXAMINATION <b>10/30/62</b>
6. SEX <b>M</b>	7. RACE <b>W</b>	8. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN <b>22</b>	10. AGENCY
9. DATE OF BIRTH <b>7/12/13</b>		11. ORGANIZATION UNIT	
12. PLACE OF BIRTH <b>VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER AND ADDRESS <b>NNMC</b>		16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total) LAST SIX MONTHS	

CLINICAL EVALUATION	
NO.	ABNORMAL
18. HEAD, FACE, NECK, AND SCALP	
19. NOSE	
20. SINUSES	
21. MOUTH AND THROAT	
22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
23. DRUMS (Perforation)	
24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 67)	
25. OPHTHALMOSCOPIC	
26. PUPILS (Equality and reaction)	
27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
28. LUNGS AND CHEST (Include breaths)	
29. HEART (Thrust, size, rhythm, sounds)	
30. VASCULAR SYSTEM (Varicosities, etc.)	
31. ABDOMEN AND VISCERA (Include hernia)	
32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Prostate, if indicated)	
33. ENDOCRINE SYSTEM	
34. G-U SYSTEM	
35. UPPER EXTREMITIES (Strength, range of motion)	
36. FEET	
37. LOWER EXTREMITIES (Range of motion) (Strength, range of motion)	
38. SPINE; OTHER MUSCULOSKELETAL	
39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
40. SKIN, LYMPHATICS	
41. NEUROLOGIC (Equilibrium tests under item 79)	
42. PSYCHIATRIC (Specify any personality deviation)	
43. PELVIC (Females only) (Check how done)	
<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)  
#4  
Numerous joints make  
Anatomy cannot follow  
12/14/62 wsf

REC-131

107-99243-218  
16

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES <b>no defects noted</b>
45. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		
46. CHEST X-RAY (Place, date, film number and result)		

43. URINALYSIS: A. SPECIFIC GRAVITY <b>1.004</b>		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN <b>neg.</b>		D. MICROSCOPIC	
C. SUGAR <b>neg.</b>		48. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		50. OTHER TESTS	

40 neg. WNL

MEASUREMENTS AND OTHER FINDINGS																																															
51. HEIGHT 5' 10 1/2"		52. WEIGHT 153		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		56. TEMPERATURE 98.6																																					
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)																																									
A. SITTING SYS. 110 DIAS. 70		B. RECUMBENT SYS. DIAS.		C. STANDING (3 min.) SYS. DIAS.		A. SITTING 100		B. AFTER EXERCISE		C. 2 MIN. AFTER																																					
59. DISTANT VISION		60. REFRACTION		61. 7.5 m		NEAR VISION																																									
RIGHT 20/20 CORR. TO 20/		BY S.		OX		CORR. TO 20/6		BY																																							
LEFT 20/20 CORR. TO 20/		BY S.		OX		CORR. TO 20/6		BY																																							
62. HETEROPHORIA (Specify distance)																																															
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV.																																					
								CT		PC PD																																					
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED																																					
RIGHT LEFT				AOC-1940 18/18						CORRECTED																																					
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST		69. INTRAOCULAR TENSION																																					
70. HEARING				71. AUDIOMETER																																											
RIGHT WV 15/15 SV 15/15				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td>250 250</td> <td>500 512</td> <td>1000 1024</td> <td>2000 2048</td> <td>3000 3072</td> <td>4000 4096</td> <td>6000 6144</td> <td>8000 8192</td> </tr> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT WV 15/15 SV 15/15</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>									250 250	500 512	1000 1024	2000 2048	3000 3072	4000 4096	6000 6144	8000 8192	RIGHT									LEFT WV 15/15 SV 15/15									LEFT								
	250 250	500 512	1000 1024	2000 2048	3000 3072	4000 4096	6000 6144	8000 8192																																							
RIGHT																																															
LEFT WV 15/15 SV 15/15																																															
LEFT																																															
				72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)																																											

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

SEC-131

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)						76. A. PHYSICAL PROFILE													
						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>P</td> <td>U</td> <td>L</td> <td>H</td> <td>E</td> <td>S</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						P	U	L	H	E	S		
P	U	L	H	E	S														
77. EXAMINEE (Check)						B. PHYSICAL CATEGORY													
A. <input checked="" type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR																			
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>A</td> <td>B</td> <td>C</td> <td>E</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>						A	B	C	E				
A	B	C	E																
79. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE E. K. [Signature]													
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE													
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)						SIGNATURE													
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE													

NUMBER OF ATTACHED SHEETS  
10

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME <b>34 HERMAN CLIN</b>		REGISTER NO. <b>FBI</b>	WARD NO. <b>STAFF CLINIC</b>
AGE <b>49</b>	SEX <b>M</b>	(Check one) <input type="checkbox"/> BEDSIDE, WHEELCHAIR, OR STRETCHER <input type="checkbox"/> BED PATIENT <input type="checkbox"/> AMBULATORY	
EXAMINATION REQUESTED			
REQUESTED BY		DATE OF REQUEST <b>10/30/62</b>	
(Above space for mechanical imprinting, if used)			
PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS			

FILM NO. <b>20134-62</b>	DATE OF REPORT <b>10-30-62</b>
RADIOGRAPHIC REPORT	

Typed 31 Oct 62

30 Oct 62. CHEST: The cardiac shadow is normal and the lung fields clear. There is scoliosis to the right, unchanged from previous films.

JSG:tec

Department of Radiology  
Naval Hospital  
National Naval Medical Center  
Bethesda 14, Maryland

**J. S. GARRISON, III**  
LCDR MC USN

**4532-61 NNMC 11-24-61**

SIGNATURE (If not in location of laboratory if not part of requesting facility)

**TECH CHECK**

NAME OF HOSPITAL OR OTHER MEDICAL FACILITY

**67-99243-218**

RADIOGRAPHIC REPORT

519-205



# REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

# F.B.I.

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>BLY, HERMAN OLIN</b>		2. GRADE AND COMPONENT OR POSITION <b>SPECIAL AGENT</b>		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL</b>		6. DATE OF EXAMINATION <b>10/30/62</b>	
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE		11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>7/12/13</b>		13. PLACE OF BIRTH <b>VIRGINIA</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)  <b>VERY GOOD</b>					

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:		
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	RELATION(S)
FATHER	51	deceased	Coronary Heart.	51		✓	HAD TUBERCULOSIS
MOTHER	77	deceased	pneumonia	77		✓	HAD SYPHILIS
SPOUSE	35	Good			✓		HAD DIABETES
	55	Good				✓	HAD CANCER
BROTHERS	47	Good				✓	HAD KIDNEY TROUBLE
AND	45	Good			✓		HAD HEART TROUBLE
SISTERS						✓	HAD STOMACH TROUBLE
					✓		HAD RHEUMATISM (Arthritis)
CHILDREN	none				✓		HAD ASTHMA, HAY FEVER, HIVES
					✓		HAD EPILEPSY (Fits)
					✓		COMMITTED SUICIDE
					✓		BEEN INSANE

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)								
YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
✓		SCARLET FEVER, ERYSIPELAS	✓		GOITER	✓		TUMOR, GROWTH, CYST, CANCER
✓		DIPHTHERIA	✓		TUBERCULOSIS	✓		RUPTURE
✓		RHEUMATIC FEVER	✓		SOAKING SWEATS (Night sweats)	✓		APPENDICITIS 1955-56
✓		SWOLLEN OR PAINFUL JOINTS	✓		ASTHMA	✓		PILES OR RECTAL DISEASE
✓		MUMPS age 12	✓		SHORTNESS OF BREATH	✓		FREQUENT OR PAINFUL URINATION
✓		WHOOPING COUGH	✓		PAIN OR PRESSURE IN CHEST	✓		KIDNEY STONE OR BLOOD IN URINE
✓		FREQUENT OR SEVERE HEADACHE	✓		CHRONIC COUGH	✓		SUGAR OR ALBUMIN IN URINE
✓		DIZZINESS OR FAINTING SPELLS	✓		PALPITATION OR POUNDING HEART	✓		BOILS age 12
✓		EYE TROUBLE	✓		HIGH OR LOW BLOOD PRESSURE	✓		VENEREAL DISEASE
✓		EAR, NOSE OR THROAT TROUBLE	✓		CRAMPS IN YOUR LEGS	✓		RECENT GAIN OR LOSS OF WEIGHT
✓		RUNNING EARS	✓		FREQUENT INDIGESTION	✓		ARTHRITIS OR RHEUMATISM
✓		CHRONIC OR FREQUENT COLDS	✓		STOMACH, LIVER OR INTESTINAL TROUBLE 1955-56	✓		BONE, JOINT, OR OTHER DEFORMITY
✓		SEVERE TOOTH OR GUM TROUBLE	✓		GALL BLADDER TROUBLE OR GALL STONES	✓		LAMENESS
✓		SINUSITIS	✓		JAUNDICE	✓		LOSS OF ARM, LEG, FINGER, OR TOE
✓		HAY FEVER	✓		ANY REACTION TO SERUM, DRUG OR MEDICINE	✓		PAINFUL OR "TRICK" SHOULDER OR ELBOW

21. HAVE YOU EVER (Check each item)		22. FEMALES ONLY: A. HAVE YOU EVER—		B. COMPLETE THE FOLLOWING:	
✓	WORN GLASSES (for reading)	✓	ATTEMPTED SUICIDE	BEEN PREGNANT	AGE AT ONSET OF MENSTRUATION
✓	WORN AN ARTIFICIAL EYE	✓	BEEN A SLEEP WALKER	HAD A VAGINAL DISCHARGE	INTERVAL BETWEEN PERIODS
✓	WORN HEARING AIDS	✓	LIVED WITH ANYONE WHO HAD TUBERCULOSIS	BEEN TREATED FOR A FEMALE DISORDER	DURATION OF PERIODS
✓	STUTTERED OR STAMMERED	✓	COUGHED UP BLOOD	HAD PAINFUL MENSTRUATION	DATE OF LAST PERIOD
✓	WORN A BRACE OR BACK SUPPORT	✓	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY
23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? <b>only one</b>		24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS <b>8</b>		25. WHAT IS YOUR USUAL OCCUPATION? <b>Special Agent FBI</b>	
				26. ARE YOU (Check one) <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED	

67-99243-218



YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
✓		27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
✓		B. INABILITY TO PERFORM CERTAIN MOTIONS
✓		C. INABILITY TO ASSUME CERTAIN POSITIONS
✓		D. OTHER MEDICAL REASONS (If yes, give reasons)
✓		28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
✓		29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
✓		30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
✓		31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
✓		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
✓		33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
✓		34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
✓		35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
✓		36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
✓		37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
✓		38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
✓		39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

consider age 38  
fracture from nature age 41  
appendix age 45

for appendix operation  
Dr. Theodore R. Coleman - Surgeon.

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE  
**HERMAN O. BLY**

SIGNATURE  
*Herman O. Bly*

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 30 thru 39)

① No trouble since appendix  
② Numerous fragments removed - admit to  
have Neurological consult.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER	DATE	SIGNATURE	NUMBER OF ATTACHED SHEETS
	10/31/60	<i>ESK</i>	1

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee BLY HERMAN O.  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in each ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

If examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No

67-99243-25

1. Agency and organizational designations: <b>FBI</b>		2. Payroll period		3. Block No.	4. Slip No.						
5. Employee's name (and social security account number when appropriate): <b>#12181 MR. HERMAN O. BLY SUPV. SA</b>		6. Grade and salary: <b>GS 14 \$13,770</b>									
<b>PAYROLL CHANGE DATA</b>											
7. Previous normal	BASE PAY	OVERTIME	GROSS PAY	RET.	FEDERAL TAX	BOND	F. I. C. A.	STATE TAX	GROUP LIFE INS.	HEALTH BENEFITS	NET PAY
8. New normal											
9. Pay this period											
10. Remarks:						11. Appropriation(s)		12. Prepared by			
								13. Audited by			
<input type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input checked="" type="checkbox"/> Other step-increase <b>Longevity #1</b> 14. Effective date <b>7-22-63</b> 15. Date last equivalent increase <b>7-13-58</b> 16. Old salary rate <b>\$13,510</b> 17. New salary rate <b>\$13,770</b> 18. Performance rating is satisfactory or better.						19. LWOP data (fill in appropriate spaces covering LWOP starting following periods): No excess LWOP    Total excess LWOP <b>67-148-8-1502</b>					
STANDARD FORM NO. 1126 6 GAO-6800-1126-109						(Signature or other authentication) <input type="checkbox"/> In pay status at end of waiting period <input type="checkbox"/> In LWOP status at end of waiting period <b>sbm</b> Initials of Clerk					

**PAYROLL CHANGE SLIP—PERSONNEL COPY**

*3/4/64*

January 7, 1963

PERSONAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

RECEIVED  
FBI  
JAN 10 1963

Dear Mr. Bly:

I am taking this occasion to commend you for the splendid manner in which you carried out your supervisory duties while assigned to the Domestic Intelligence Division relative to a matter of grave concern to the Bureau in the security field.

You handled your numerous responsibilities in a very resourceful and thorough manner and your services were of the highest caliber. You contributed materially to the fine results realized at recently completed hearings and I want you to know of my appreciation for your excellent performance.

Sincerely yours,

J. Edgar Hoover

- 1 - Mr. [REDACTED] (Personal Attention)  
SA Bly reported to your division 1-3-63  
Re: United States vs Communist Party, USA,  
Internal Security-C, Internal Security Act of 1950

- 1 - Miss Usilton (Sent Direct)

CTP:jps

(5)

67-99243

SA Bly transferred from Domestic Intelligence Division to Inspection Division 1-3-63.

Based on memo Baumgardner to Sullivan, 1-2-63 re: "United States v. Communist Party, USA, Internal Security-C, Internal Security Act of 1950, Recommendation for Commendations."



Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Malone \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

July 10, 1963

PERSONAL

Mr. Herman C. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

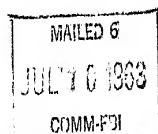
Apropos of our discussion last Wednesday and your letter of July 5, 1963, concerning your request for retirement, I wish to advise your application will be forwarded to the Civil Service Commission for approval.

It has only been through the efforts of all my associates that the Bureau has been able to cope with the momentous problems which have confronted us, and you may certainly be proud of the record you have achieved. I want to express once more my gratitude to you for your help.

I hope that you will keep in touch with us following retirement, and that Mrs. Bly's health will soon show a decided improvement. You both have my best wishes for a full measure of happiness in the years to come.

Sincerely,

J. Edgar Hoover



1 - Mr. Gale (Personal Attention) Mr. Bly will be interviewed in the Personnel Section and provided with pertinent retirement information.

1 - Mrs. Axtell  
1 - Voucher-Statistical Section (Sent Direct)  
1 - Mr. Jones - SA Bly will cease duty after four hours on 7-24-63.  
1 - Miss Goode (last physical 10-30-62).  
Satisfactory to place above on Special Correspondents' List.  
WEC:par/ves  
(8) ENCLOSURE  
SEE NOTE PAGE 2  
JUL 11 1963  
MAIL ROOM ☐ TELETYPE UNIT ☐

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

NOTE: SA Bly EOD in the Bureau 8-12-40. He will be 50 years old on 7-12-63 and will therefore be qualified by age and service for retirement under the liberalized provisions of the Civil Service Retirement Act. He has been assigned as an Agent in the Inspection Division since 1-3-63. He is in GS-14, \$15,395 per annum.

Mr. Tolson	✓
Mr. Belmont	✓
Mr. Mohr	✓
Mr. Casper	✓
Mr. Callahan	✓
Mr. Conrad	✓
Mr. DeLoach	✓
Mr. Evans	✓
Mr. Gale	✓
Mr. Rosen	✓
Mr. Sullivan	✓
Mr. Tavel	✓
Mr. Trotter	✓
Tele. Room	✓
Miss Holmes	✓
Miss Gandy	✓

July 3, 1963

Mr. John Edgar Hoover, Director  
Federal Bureau of Investigation  
Washington, D.C.

Dear Mr. Hoover:

With this letter I hereby request your permission to retire effective August 12, 1963, thereby completing 23 years of service as a Special Agent.

Many words could be used to express my appreciation to you for allowing me to serve my country as a Special Agent for the F.B.I. and many more to outline the reasons which now require me to seek retirement.

Briefly, I plan to devote the future years to my wife who has been an uncomplaining Bureau wife over the 23 years of my service. For the past two years, she has been under the care of specialists for rheumatoid arthritis. Her condition has shown very little improvement. I am hoping that a more normal living routine will improve her over-all health and arthritic problem.

If you could spare a few minutes from your very busy schedule, I would greatly appreciate the opportunity to thank you in person for allowing me to share in the important work of the F.B.I. in its ever increasing role in the war against crime and international communism.

With warmest personal regards, I remain,

Sincerely yours,

*Herman O. Bly*  
Herman O. Bly

REC-148

67-99243-227

JUL 8 1963

**EXP. PROC.**

JUL 3 1963

32 7-5

*I saw him.*  
*7/3/63 H.*

*1 copy sent  
7-10-63  
WEC/par*

## RETIREMENT INFORMATION

Name: **Herman O. Bly**Date: **July 10, 1963**

## APPLICATION

- ☐ The "Application for Retirement" will be forwarded by the Bureau to the Civil Service Commission (CSC) for approval.
- ☒ The enclosed "Application for Retirement" should be executed (or changed as indicated below) and promptly returned to the Bureau for forwarding to the Civil Service Commission (CSC) for approval.

## DEPOSIT OR REDEPOSIT

Making either a deposit or redeposit is optional. Such amounts are paid directly by you to CSC. It is possible that you have already made the deposit or redeposit indicated below without the Bureau's knowledge, dealing directly with CSC. If so, you may ignore this matter now.

- ☒ Not applicable
- ☐ The deposit you owe is a payment to the retirement fund to cover a period of service during which no retirement deductions were withheld from salary. Credit is given for service not covered by deductions; however, if the deposit is not paid, your annuity will be reduced each year by 10% of the amount due as deposit. The amount owed is \$ \_\_\_\_\_.
- ☐ The redeposit you owe is a payment to the retirement fund to cover a period of service for which retirement deductions were withheld from your salary but later refunded to you on your resigning. No credit is allowed in the computation of annuity for the period of service covered by the refund unless redeposit is made. The amount owed is \$ \_\_\_\_\_.

## ANNUITY

Annuities are computed on full months of service. If you are married, survivor annuity to your spouse is payable automatically unless you elect in writing an annuity for yourself only. If this is done, a signed and dated statement which reads, "I hereby notify the U. S. Civil Service Commission that I do not desire my wife (or husband) to receive a survivor annuity after my death," must be attached to your application.

You should get the first annuity check about two months after separation from the Bureau's rolls. The exact amount of annuity is calculated by CSC; however, estimated monthly annuity before deduction for health insurance coverage is as follows:

	With Deposit	Without Deposit	With Re- deposit	Without Redeposit	With Deposit & Redeposit
<input checked="" type="checkbox"/> <b>PLAN A</b> (Single Life Annuity)	\$ <b>537</b>	\$ _____	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> <b>PLAN B</b> (Reduced Type of Annuity with benefit to Widow or Widower)	\$ <b>506</b>	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> <b>PLAN C</b> (Reduced Annuity with Benefit to Person having an Insurable Interest)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Survivor Annuity (55% of all or whatever portion of your earned annuity you specify)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

plus annuity for each eligible child.

## SEPARATION FROM ROLLS

It is satisfactory to cease active duty **after 4 hours on 7-24-63**, and the annuity will commence **8-13-63**

- ☐ Immediately following the cease-active-duty date.
- ☒ Immediately following the expiration of current accrued annual leave on **8-12-63** earned through **8-3-63**
- Separation from the Bureau will be effective at the close of business **8-12-63** (Item 8 on the retirement application) provided no annual leave is used by you subsequent to **6-22-63**.

- ☐ If retirement is for disability, separation takes effect after the approval of CSC is received by the Bureau or after the expiration of accrued sick leave, whichever occurs later. A ruling on "sick pay" entitles employees retired for disability to exempt up to \$100 per week of their disability annuity from Federal income tax. This exemption terminates when normal retirement age is reached. Any questions you may have as an annuitant regarding your income tax liability or privileges can be answered by the Internal Revenue Service.

- ☒ You will receive a lump-sum payment for your accumulated annual leave in the approximate amount of \$ **4350**.

ENCLOSURE

67-99243-227

3



## FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT

☐ Records show you executed Standard Form 53, "Waiver of Life Insurance Coverage."

☒ Your coverage is in the amount of \$ **16,000**. You may continue this group insurance coverage at no premium cost following retirement or convert the insurance to an individual life insurance policy without medical examination. If converted, the double indemnity and dismemberment protection stops, and you will pay the usual premium charged by the company for a person of your age and class of risk. If you elect to keep the group insurance, the \$ **16,000** protection continues until you are age 65. At that time this amount begins to reduce at the rate of 2% per month until you are about 58 years and 2 months of age. If you are now 65 or over, the same reduction process occurs, the maximum reduction being reached in three years and two months. Coverage in the reduced amount (25% of face value) continues at no cost as long as you remain a retired annuitant. If you wish to convert the group life coverage, the Bureau should be advised immediately. Otherwise, the original of Standard Form 56, Agency Certification of Insurance Status, will be forwarded to CSC and a copy will be forwarded to you by the Bureau at a later date.

## DESIGNATION OF BENEFICIARY, STANDARD FORM 54, FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT OF 1954

Designation filed:

☒ No, but not necessary as beneficiary will be in order of precedence used by United States Government, i.e., (1) widow or widower, (2) children, (3) parents, etc.

☐ Yes; beneficiary designated as \_\_\_\_\_  
This designation is being forwarded to CSC and it will remain valid unless changed or canceled. Contact CSC for any change desired following retirement.

## FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959

☐ Records show you elected not to enroll

☒ Records show you enrolled in the following plan:

☐ Government-wide Service Benefit Plan (Blue Cross - Blue Shield)

☐ Government-wide Indemnity Benefit Plan (Aetna Life Insurance Company)

☐ Comprehensive Medical Plan

☒ Special Agents Mutual Benefit Association (SAMBA)

**Note:** The life insurance you have under this plan will continue in force for 6 months following your last semiannual premium payment. If you desire the protection to continue beyond that time, you may convert it to a private policy without a physical examination. Such conversion must be applied for in writing, and to do so you should write to SAMBA, 1720 Massachusetts Avenue, Northwest, Washington 6, D. C.

Unless you cancel your present enrollment, you will remain under your health benefits plan after retirement, and your enrollment will be transferred to CSC. The cost of your share of the plan will be deducted from your annuity by CSC.

Enrollment of an employee who dies while he is enrolled "for self and family" continues for his family if at least one family member is entitled to an annuity as the survivor. If the survivor annuitant is the only eligible family member, the retirement system will automatically change the enrollment to "self."

The original of Standard Form 2810, "Notice of Change in Enrollment Status," will be forwarded to you by the Bureau at a later date.

## SPECIAL ACCIDENT AND TRAVEL INSURANCE (SATI)

If you are a member of SATI, after your retirement you may continue but not increase coverage up to a maximum of \$25,000.00 at the rate of \$2.25 per thousand. For details on the retirement coverage under SATI, you should write Parker and Co. of D. C., Inc., 1001 Connecticut Avenue, N. W., Washington 6, D. C.

## ENCLOSURES

☒ Standard Form 2801, "Application for Retirement."

☒ Standard Form 8, "Notice to Federal Employee About Unemployment Compensation."

☒ Pamphlet, "Your Retirement System."

☐ Standard Form 2801-B, "Physician's Statement," for disability retirement.

REC-138

January 2, 1964

Office of Personnel  
2430 E Street, Northwest  
Washington 25, D. C.

Attention: Personnel Officer

Gentlemen:

RE: HERMAN O. BLY

In accordance with your request you will find the following enclosed:

☒ Official Personnel Folder

☒ Record of Leave Data Transferred

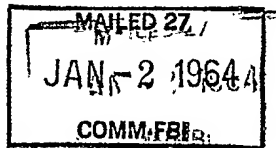
Very truly yours,

*J. Edgar Hoover*  
John Edgar Hoover  
Director

ENCLOSURE

Enc. (2)

*dmp*  
(3)  
67-99243



Based on memorandum Davidson to Callahan, LDH:ves, 1-2-64.

*W*

- Tolson \_\_\_\_\_
- Belmont \_\_\_\_\_
- Mohr \_\_\_\_\_
- Casper \_\_\_\_\_
- Callahan \_\_\_\_\_
- Conrad \_\_\_\_\_
- DeLoach \_\_\_\_\_
- Evans \_\_\_\_\_
- Gale \_\_\_\_\_
- Rosen \_\_\_\_\_
- Sullivan \_\_\_\_\_
- Tavel \_\_\_\_\_
- Trotter \_\_\_\_\_
- Tele. Room \_\_\_\_\_
- Holmes \_\_\_\_\_
- Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

*CRP-WBKA*

MEMORANDUM

RE: HERMAN O. BLY

A character and fitness investigation including an appropriate security check was completed by the FBI on July 26, 1940. No derogatory information regarding this employee was disclosed by this investigation, which was of the type later contemplated by Executive Order 10450. The employee was cleared for access to information of all classifications as required by the duties to which assigned.

To RELEASING ORGANIZATION— You are requested to furnish promptly the leave data on

BLY, HERMAN O.

(Name of employee)

July 12, 1913

(Date of birth)

December 23, 1963

(Date of request)

Federal Bureau Of Investigation  
Washington, D. C.

NOTE

If this address is not the correct one to  
which future inquiries should be mailed, insert  
the correct address below.

Return to: EMPLOYING ORGANIZATION

(ENCLOSURE)

Office of Personnel  
2430 E St. N. W.  
Washington, D. C.  
Attn: Personnel Officer

67- 99243 - 231  
Searched  
10 JAN 6 1964  
49

1. LAST NAME	FIRST NAME	INITIAL(S)	2. APPOINTMENT DATA			3. TOTAL SERVICE FOR LEAVE (as of date of separation)		
			Entered on duty	F/T	P/T	Years	Months	Days
4. DATE AND NATURE OF SEPARATION			Subject to Sec. 203(d), 1951 Leave Act			<input type="checkbox"/> More than 15 years		
			Yes <input type="checkbox"/> No <input type="checkbox"/> Ceased to be subject to Sec. 203(d) on _____ Annual Leave Bal. _____					

SUMMARY OF ANNUAL AND SICK LEAVE			SUMMARY OF HOME LEAVE		REMARKS								
(HOURS)	ANNUAL	SICK	(DAYS)										
5. Balance from prior leave year ended _____			14. Date arrival abroad for HL purposes _____										
19 _____			15. Current balance as of _____ 19 _____										
6. Current leave year accrual through _____			16. 12-month accrual rate _____										
19 _____			17. Dates leave used, prior 24 months _____										
7. Total _____			18. Monthly accrual date _____										
8. Reduction in credits, if any (current year) _____			19. Calendar days credit for next accrual date _____										
9. Total leave taken _____			20. Date basic service period completed _____										
10. Balance _____													
11. Total hours paid in lump sum _____			21. Dates during current calendar yr. _____ to _____		<b>MILITARY LEAVE</b> 22. Dates during preceding calendar yr. _____ to _____ <b>ABSENCE WITHOUT PAY</b> <table border="1"> <tr> <th>LWOP or Furlough</th> <th>AWOL or Suspension</th> </tr> <tr> <td>(Hours)</td> <td>(Hours)</td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	LWOP or Furlough	AWOL or Suspension	(Hours)	(Hours)				
LWOP or Furlough	AWOL or Suspension												
(Hours)	(Hours)												
12. Salary rate(s) _____													
13. Lump sum leave dates: From _____ to _____ (Hours)													
26. Certified correct by: _____ (Signature) (Date) _____ (Title) (Telephone)			23. During leave year in which separated 24. During step-increase waiting period which began on _____ 25. During 12-month HL accrual period ( ) _____										

NOTIFICATION OF PERSONNEL ACTION

50-114

(For agency use)

1. NAME (CAPS) LAST-FIRST-MIDDLE <b>BLY, HERMAN O.</b>		MR.-MISS-MRS.	2. (For agency use)	3. BIRTH DATE (Mo., Day, Year) <b>July 12, 1913</b>	4. SOCIAL SECURITY NO.
5. VETERAN PREFERENCE 1-NO 3-10 PT. DISAB. 5-10 PT. OTHER 2-5 PT. 4-10 PT. COMP.			6. TENURE GROUP	7. SERVICE COMP. DATE	8. PHYSICAL HANDICAP CODE
9. FEGLI 1-COVERED 2-INELIGIBLE 3-WAIVED			10. RETIREMENT 1-CS 3-FS 5-OTHER 2-FICA 4-NONE		11. (For CSC use)
12. NATURE OF ACTION CODE <b>Excerpted Appointment</b>			13. EFFECTIVE DATE (Mo., Day, Year) <b>Dec. 8, 1963</b>		14. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
15. FROM: POSITION TITLE AND NUMBER			16. PAY PLAN AND OCCUPATION CODE	17. GRADE OR LEVEL	18. SALARY
19. NAME AND LOCATION OF EMPLOYING OFFICE					

20. TO: POSITION TITLE AND NUMBER <b>Operations Officer</b>	21. PAY PLAN AND OCCUPATION CODE	22. GRADE OR LEVEL <b>15 5</b>	23. SALARY <b>\$16485.</b>
24. NAME AND LOCATION OF EMPLOYING OFFICE			

25. DUTY STATION (City—county—State)			26. LOCATION CODE	
27. APPROPRIATION	28. POSITION OCCUPIED 1-COMPETITIVE SERVICE 2-EXCEPTED SERVICE	29. APPORTIONED POSITION FROM: 1-PROVED-1 2-WAIVED-2	TO: STATE	

30. REMARKS: ☐ A. SUBJECT TO COMPLETION OF 1 YEAR PROBATIONARY (OR TRIAL) PERIOD COMMENCING \_\_\_\_\_  
☐ B. SERVICE COUNTING TOWARD CAREER (OR PERMANENT) TENURE FROM: \_\_\_\_\_  
 SEPARATIONS: SHOW REASONS BELOW, AS REQUIRED. CHECK IF APPLICABLE: ☐ C. DURING PROBATION ☐ D. FROM APPOINTMENT OF 6 MONTHS OR LESS

Federal Bureau Of Investigations  
Washington, D. C.  
August 12, 1940 to August 12, 1963

PLEASE FORWARD OFFICIAL  
PERSONNEL FOLDER TO:

OFFICE OF PERSONNEL  
2000 L Street, N.W.  
Washington 25, D. C.  
Attn: Personnel Officer

31. DATE OF APPOINTMENT AFFIDAVIT (Accessions only)	34. SIGNATURE (Or other authentication) AND TITLE  <b>237</b>
32. OFFICE MAINTAINING PERSONNEL FOLDER (If different from employing office)	
33. CODE, EMPLOYING DEPARTMENT OR AGENCY <b>CIA</b>	
35. DATE	

4. PERSONNEL FOLDER COPY

NOTIFICATION OF PERSONNEL ACTION

5 PART  
50-114-02

(For agency use)

1. NAME (CAPS) LAST-FIRST-MIDDLE <b>BLY, HERMAN O. (MR.)</b>		MR.-MISS-MRS.	2. (For agency use) <b>12181</b>	3. BIRTH DATE (Mo., Day, Year) <b>7-12-13</b>	4. SOCIAL SECURITY NO. <b>577-07-9216</b>
5. VETERAN PREFERENCE <b>1</b> 1-NO 3-10 PT. DISAB. 5-10 PT. OTHER 2-5 PT. 4-10 PT. COMP.			6. TENURE GROUP	7. SERVICE COMP. DATE	8. PHYSICAL HANDICAP CODE
9. FEGLI <b>1</b> 1-COVERED 2-INELIGIBLE 3-WAIVED			10. RETIREMENT <b>1</b> 1-CS 3-FS 5-OTHER 2-FICA 4-NONE		11. (For CSC use)
12. NATURE OF ACTION <b>RETIREMENT (TWENTY YEARS INVESTIGATIVE EXPERIENCE)</b>			13. EFFECTIVE DATE (Mo., Day, Year) <b>cb 8-12-63</b>		14. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
15. FROM: POSITION TITLE AND NUMBER <b>Supervisory Special Agent #61-F-101 160</b>			16. PAY PLAN AND OCCUPATION CODE <b>GS 14 Series 1811</b>	17. GRADE OR LEVEL	18. SALARY <b>\$15,395 pa</b>
19. NAME AND LOCATION OF EMPLOYING OFFICE					

20. TO: POSITION TITLE AND NUMBER		21. PAY PLAN AND OCCUPATION CODE	22. GRADE OR LEVEL	23. SALARY
24. NAME AND LOCATION OF EMPLOYING OFFICE				

25. DUTY STATION (City-county-State)			26. LOCATION CODE	
27. APPROPRIATION <b>S. &amp; E., FBI</b>		28. POSITION OCCUPIED 1-COMPETITIVE SERVICE <b>2</b> 2-EXCEPTED SERVICE	29. APPORTIONED POSITION FROM: TO: STATE 1-PROVED-1 2-WAIVED-2	

30. REMARKS: ☐ A. SUBJECT TO COMPLETION OF 1 YEAR PROBATIONARY (OR TRIAL) PERIOD COMMENCING \_\_\_\_\_  
☐ B. SERVICE COUNTING TOWARD CAREER (OR PERMANENT) TENURE FROM: \_\_\_\_\_  
☐ C. DURING PROBATION ☐ D. FROM APPOINTMENT OF 6 MONTHS OR LESS

At his request, he voluntarily retired in view of Section 6 (c) of the Civil Service Retirement Act.

Annuity payments to begin immediately.

Forwarding address: 2308 North Monroe, Arlington, Virginia

Paid hereon for the period 8-4-63 through cb 8-12-63. Plus lump sum payment to cover 697 hours ending after 1 hour on 12-12-63. Three holidays included.

31. DATE OF APPOINTMENT AFFIDAVIT (Accessions only)		34. SIGNATURE (Or other authentication) AND TITLE <b>J. E. Hoover Director</b>	
32. OFFICE MAINTAINING PERSONNEL FOLDER (If different from employing office)		35. DATE <b>8-14-63</b>	
33. CODE EMPLOYING DEPARTMENT OR AGENCY <b>DJ 02 FEDERAL BUREAU OF INVESTIGATION WASHINGTON 25, D. C.</b>			

4. PERSONNEL FOLDER COPY

STANDARD FORM 56 REVISED JULY 1962 U. S. CIVIL SERVICE COMMISSION CHAPTER 1-3, F.P.M. 56-104		AGENCY CERTIFICATION OF INSURANCE STATUS <b>Federal Employees' Group Life Insurance Act</b>	
1. FULL NAME OF EMPLOYEE (Last) (First) (Middle) <b>ELY, HERMAN O.</b>		2. DATE OF BIRTH (MONTH, DAY, YEAR) <b>7-12-13</b>	
3. CHECK THE REASON FOR TERMINATING INSURANCE (a) <input type="checkbox"/> SEPARATED (c) <input type="checkbox"/> DIED (b) <input checked="" type="checkbox"/> RETIRED (d) <input type="checkbox"/> 12 MONTHS NON-PAY STATUS (e) <input type="checkbox"/> OTHER (Specify) _____ WAS EMPLOYEE AT TIME OF DEATH AN APPLICANT FOR CIVIL SERVICE RETIREMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
4. CHECK APPROPRIATE BOX CONCERNING S. F. 54, DESIGNATION OF BENEFICIARY (a) <input type="checkbox"/> CURRENT S. F. 54 ATTACHED (b) <input checked="" type="checkbox"/> A CURRENT S. F. 54 IS NOT ON FILE WITH THIS AGENCY (c) <input type="checkbox"/> A CURRENT S. F. 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT) NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN FREE LIFE INSURANCE, ATTACH CURRENT S. F. 54, IF ANY, TO ORIGINAL S. F. 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF S. F. 56; IF NO CURRENT S. F. 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT S. F. 54 IS ON FILE BY CHECKING BOX 4 (b) OR (c). A CURRENT S. F. 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.			
5. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR) <b>8-12-63</b>	6. ANNUAL COMPENSATION RATE - NOT AMOUNT OF INSURANCE - (CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE ON DATE IN ITEM 5.) <b>\$ 15,395</b> PER ANNUM	7. DATE OF NOTICE OF CONVERSION PRIVILEGE (SF 55) TO EMPLOYEE (MONTH, DAY, YEAR)	
8. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS OFFICIAL RECORDS, AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5. (SIGN ORIGINAL ONLY)			
(Personal signature of authorized agency official) <b>H. P. Callahan</b>		(Date) <b>August 14, 1963</b>	
(Type name of authorized agency official) <b>Federal Bureau of Investigation</b>		(Title) <b>Assistant Director</b>	
(Name of agency)		(Mailing address of agency) <b>Washington, D. C.</b>	

SEE OTHER SIDE  
FOR  
INSTRUCTIONS TO EMPLOYING AGENCY

*Orig SF 2810 + copy SF 56 to empl. at: 2308  
 North Monroe, Arlington, VA.  
 Copy SF 2810 + Orig SF 56 to Vander Pital,  
 8-14-63 dmw*

PART 3 - FILE COPY

5-

25

3/  
dmw



TO: MR. CALLAHAN

DATE: .

July 25, 1963

FROM: J. H. GALE

~~Artell~~  
~~Wood~~  
~~PAYROLL~~

Name of Employee <b>HERMAN O. BLY</b>	EOD Date <b>8/12/40</b>	Title <b>SPECIAL AGENT</b>
Last Local Address <b>2308 North Monroe, Arlington, Virginia</b>	Forwarding Address <b>Same</b>	
Cease-active-duty Date (hour and last day physically at work) <b>1:30 PM, 7/24/63 (AL until August 12/63 when retirement effective)</b>	Tour of Duty <b>9 - 5:30 Monday through Friday</b>	
Leave Data Leave category <input type="checkbox"/> 4 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 8		

Hours of accrued leave employee will have at close of business on cease-active-duty date.

AL 673 SL 1165

Hours of accrued annual leave carried over at beginning of current leave year

AL 673

If employee has been granted advanced leave, indicate number hours owed at close of cease-active-duty date.  
(Read before interviewing)

AL        SL       

The exit interview, to be beneficial, must be conducted as promptly as possible after receipt of resignation. Where it involves a clerical employee, it shall be conducted by the Agent supervisor under whose jurisdiction the employee works. Where it involves a Special Agent, each SAC shall personally conduct the exit interview. In the absence of the SAC, the exit interview should then be conducted by the official in the field office who is acting for him. In every instance the exit interview form shall reflect the name of the official who actually conducted the interview and the form must be signed by him on the reverse side in the space provided. There are to be no exceptions. The interview should be conducted in adequate privacy with adequate time. It should be designed to supplement resignation, to obtain real, motivating reason for resignation, to serve as basis for (1) accurate analysis of turnover, (2) determining necessary or desirable organizational improvements, and (3) permitting a recorded recommendation regarding future reinstatement. Many times, an exit interview, properly and promptly conducted, results in saving a valuable employee. On involuntary separations, the exit interview is designed to record the reason and any pertinent comments, it being assumed the recommendation would be unfavorable for reinstatement.

Reasons given for separation (Check block applicable)

☐ 1. Military

2. Working conditions

☐ a. Excessive work (overtime, 6-day week)

☐ b. Unsatisfactory relations with Supervisor or employees

☐ c. Interest of work (monotony)

☐ d. Shifts

☐ e. Transfer (failure to obtain or unable to accept)

☐ f. Other employment: (Check specific ☐ 1. promotional prospects ☐ 2. better salary  
reason and see Item F.) ☐ 3. enter different field ☐ 4. vicinity of home

☐ g. Level of work (unsuited to ability)

☐ h. Unsatisfactory development

3. General

☐ a. General living costs

☐ b. Housing facilities

☐ c. Transportation

☐ d. Poor health (self)

☐ e. Poor health (family) (needed at home)

☐ f. Homesickness

☐ g. Marriage

☐ h. Maternity

☐ i. Housewife or child care

☐ j. Attend school (See Item F)

☒ k. Retirement

☐ l. Change of residence (husband or family moving)

☐ m. Summer employee returning to school

☐ n. Other reasons (such as those which do not come under specific categories listed)  
(explanation should appear under comments)

4. Involuntary

☐ a. Dismissed with prejudice

☐ b. Requested resignation with prejudice

☐ c. Requested resignation without prejudice

☐ d. Dropped from rolls without prejudice

67-NOT RECORDED

3 AUG 1 1963

(over)

A. Did employee resign prior to expiration of any agreement made, such as in connection with initial appointment, special training, foreign assignment, etc.? ☐ Yes ☒ No

B. Does employee have any specific suggestion for improving the organization? If so, explain. *(In the event the suggestion is new, it should be presented to the Bureau for consideration. If previously considered by Bureau and adopted or turned down the employee should be so advised.)* *NO*

1963 JUL 26 PM 12 25

C. Has employee been cautioned about divulging confidential information acquired in job? Failure to abide by this provision violates Department of Justice regulations and may violate certain statutes providing maximum severe penalties of a \$10,000 fine or 10 years' imprisonment, or both. *yes*

*Jul 24* D. All Government property, documents made or received while in the Bureau's service, including FBIRA card, will be collected on date employee ceases active duty (exceptions: commendation, censure or promotion letters or copies of expense vouchers, etc.). *yes*

E. If employee is resigning for maternity purposes, appropriate block must be marked:

☐ Employee does not desire payment for accrued sick leave as she will not be incapacitated for duty after indicated cease-active-duty date.

☐ Doctor's certificate attached reflecting (1) employee is incapacitated for duty after indicated cease-active-duty date, and (2) expected date of confinement.

☐ Doctor's certificate attached reflecting employee can safely continue working to date specified. *(Applicable to those cases where the employee desires to work up to less than 6 weeks before expected date of delivery.)*

F. Comments: *(Please state specific, individual reason in explanation of check on other side of form. Set out if it can possibly be obtained, (1) re employment - information as to where the other employment will be, its nature, the salary that will be paid and when it will begin; (2) re school - date employee proposes to enroll.)*

G. Recommendations re reinstatement: ☒ Yes ☐ No *(If No, explain why)*

*James H. Gal*

Interview Conducted By (Signature)

*Asst. Director*

Title

1. LAST NAME <b>BLY, HERMAN O. (MR.)</b>			FIRST NAME			INITIAL(S)			2. APPOINTMENT DATA			3. TOTAL SERVICE FOR LEAVE (as of date of separation)							
4. DATE AND NATURE OF SEPARATION:  <b>Retirement effective cb 8-12-63</b>									Entered on duty <b>8-12-60</b>			F/T <b>X</b>		P/T					
									Subject to Sec. 203(d), 1951 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/>					<input type="checkbox"/> More than 15 years					
									Ceased to be subject to Sec. 203(d) on _____ Annual Leave Bal. _____										
SUMMARY OF ANNUAL AND SICK LEAVE									SUMMARY OF HOME LEAVE						REMARKS  <b>* Claims no Government Service other than F. B. I.</b>				
(HOURS)			ANNUAL		SICK		(DAYS)												
5. Balance from prior leave year ended <u>1/5</u>							14. Date arrival abroad for HL purposes _____												
19 <u>63</u>			673		1161		15. Current balance as of _____ 19 _____												
6. Current leave year accrual through <u>8/3</u>							16. 12-month accrual rate _____												
19 <u>63</u>			120		60		17. Dates leave used, prior 24 months _____												
7. Total			793		1221		18. Monthly accrual date _____												
8. Reduction in credits, if any (current year)			0		0		19. Calendar days credit for next accrual date _____												
9. Total leave taken			120		56		20. Date basic service period completed _____												
10. Balance			673		1165														
11. Total hours paid in lump sum <u>697 (3 holidays inc.)</u>									MILITARY LEAVE										
12. Salary rate(s) <u>\$15,395 pa</u>									21. Dates during current calendar yr. _____ to _____										
13. Lump sum leave dates: From <u>8-13-63</u> to <u>12-12-63</u> <u>1</u> (Hours)									22. Dates during preceding calendar yr. _____ to _____										
26. Certified correct by:									ABSENCE WITHOUT PAY										
(Signature) _____ (Date) _____									<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>LWOP or Furlough (Hours)</td> <td>AWOL or Suspension (Hours)</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> </table>					LWOP or Furlough (Hours)	AWOL or Suspension (Hours)	0	0	0	0
LWOP or Furlough (Hours)	AWOL or Suspension (Hours)																		
0	0																		
0	0																		
<b>John Edgar Hoover</b> Director									23. During leave year in which separated										
									24. During step-increase waiting period which began on <u>7-22-62</u>										
									25. During 12-month HL accrual period (dates): _____										

Standard Form No. 1150  
6 GAO 8000  
1150-105

### RECORD OF LEAVE DATA TRANSFERRED

67-NOT RECORDED  
4 MAR 20 1964

70

3/23/64

10

1

REC-117

April 30, 1976

b6  
b7C

PERS. REC. UNIT

Mr. Herman O. Bly  
5315 Shalley Circle  
Whiskey Creek C. C. Estates  
Fort Myers, Florida 33901

Dear Mr. Bly:

Many thanks for your letter of April 17th with enclosures. I certainly enjoyed having the opportunity to read your speech.

Your observations on the Counterintelligence Program are very much appreciated, particularly in view of your close association with the origins of the program. In this regard, I feel that our representatives have made it clear to various committees inquiring into this program exactly what its purpose was. The recent publicity it has received is most unfortunate, but I assure you we are not missing any opportunities to make it clear this program was for disruptive purposes.

Your kind offer of assistance is most encouraging, and all of us in the Bureau are pleased to know we can count on your continued support.

Sincerely yours,

C. M. Kelley

Clarence M. Kelley  
Director

MAILED 10  
MAY 3 1976  
FBI

- Assoc. Dir. \_\_\_\_\_
- Dep. AD Adm. \_\_\_\_\_
- Dep. AD Inv. \_\_\_\_\_
- Asst. Dir.: \_\_\_\_\_
- Admin. \_\_\_\_\_
- Comp. Syst. \_\_\_\_\_
- Ext. Affairs \_\_\_\_\_
- Files & Com. \_\_\_\_\_
- Gen. Inv. \_\_\_\_\_
- Ident. \_\_\_\_\_
- Inspection \_\_\_\_\_
- Intell. \_\_\_\_\_
- Laboratory \_\_\_\_\_
- Legal Coun. \_\_\_\_\_
- Plan. & Eval. \_\_\_\_\_
- Spec. Inv. \_\_\_\_\_
- Training \_\_\_\_\_
- Telephone Rm. \_\_\_\_\_
- Director's Sec'y \_\_\_\_\_

NOTE: Mr. Bly is a former SA who EOD 8-12-40 and retired 7-24-63. He is on the Bureau mailing list.

MHB:ash (3)

APPROVED:

- Assoc. Dir. \_\_\_\_\_
- Dep. AD Adm. \_\_\_\_\_
- Dep. AD Inv. \_\_\_\_\_
- Asst. Dir.: \_\_\_\_\_
- Admin. \_\_\_\_\_

- Comp. Syst. \_\_\_\_\_
- Ext. Affairs \_\_\_\_\_
- Gen. Inv. \_\_\_\_\_
- Ident. \_\_\_\_\_
- Inspection \_\_\_\_\_
- Intell. \_\_\_\_\_
- Laboratory \_\_\_\_\_
- Legal Coun. \_\_\_\_\_
- Plan. & Eval. \_\_\_\_\_
- Rec. Mgmt. \_\_\_\_\_
- Spec. Inv. \_\_\_\_\_
- Training \_\_\_\_\_

b6  
b7C

REMOVED BY SRD

MAIL ROOM

TELETYPE UNIT

HERMAN O. BLY  
5315 SHALLEY CIRCLE  
FORT MYERS, FLORIDA 33901

February 21, 1977

Mr. Clarence M. Kelley, Director  
Federal Bureau of Investigation  
U.S. Department of Justice  
Washington, D.C. 20535

Dear Mr. Kelley:

You will recall that under date of April 17, 1976, I sent you a copy of a lecture entitled "Communism vs. Christianity in a Turbulent World", which I had given before a Methodist Men's group in Fort Myers, Florida. I thought you would like to know that I have just been advised that the Freedoms Foundation of Valley Forge, Pennsylvania has awarded this lecture the George Washington Honor Medal in its 1976 National Awards Program.

I have carefully revised and brought up-to-date this lecture into a new version entitled "Communism vs. Religion", two copies are being enclosed herewith.

*one copy sent to External Affairs Division, J. and*

The detractors and critics of the FBI and CIA have been provided great latitude and widespread publicity resulting in a weakening of the intelligence gathering capabilities of these key agencies responsible for the protection of our country. The enclosed lecture is designed to show to what extent the security apparatus of our country has been decimated and provides in concise language a clear picture of certain key aspects of communism a most complex subject matter.

It is hoped that the open message in this revised lecture will help former loyal friends of the FBI see the current problems confronting the FBI a little more clearly as well as alerting them to the increasing dangers of international communism in a different and hopefully more effective manner.

For your information, I have sent copies of this lecture to eleven U.S. Senators and nine U.S. Congressmen, and to a number of key syndicated writers as well as certain organizations who hopefully will be persuaded to come to the assistance of the FBI.

With kindest regards and with sincere hopes that the pendulum will start swinging back in support of the FBI, I remain,

Sincerely yours,

Herman O. Bly  
(FORMER SA)

Herman O. Bly  
5315 Shalley Circle  
Whiskey Creek C. C. Estates  
Fort Myers, FL 33901

ENCLOSURE

ack  
cam: gler  
3/1/77 enc. 2

24 MAR 3 1977

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Assoc. Dir. \_\_\_\_\_  
 Dep. AD Adm. \_\_\_\_\_  
 Dep. AD Inv. \_\_\_\_\_  
 Asst. Dir.:  
 Adm. Serv. DA  
 Ext. Affairs \_\_\_\_\_  
 Fin. & Pers. \_\_\_\_\_  
 Gen. Inv. \_\_\_\_\_  
 Ident. \_\_\_\_\_  
 Intell. \_\_\_\_\_  
 Legal Coun. \_\_\_\_\_  
 Plan. & Insp. \_\_\_\_\_  
 Rec. Mgt. \_\_\_\_\_  
 S. & T. Serv. \_\_\_\_\_  
 Spec. Inv. \_\_\_\_\_  
 Training \_\_\_\_\_  
 Telephone Rm. \_\_\_\_\_  
 Director's Sec'y \_\_\_\_\_



b6  
 b7C

# 34  
 FEB 22 1977  
 EXP. PROC.

Numerous references are made to  
 the Director and the FBI in the  
 attached lecture "Communism vs.  
 Religion."

Pers. Rec. Unit

# ***Communism vs. Religion***

---

By

HERMAN O. BLY

Tenor of Remarks

Lecture given at a dinner meeting of the  
Fort Myers Caloosa Lions Club  
Fort Myers, Florida  
January 11, 1977

## COMMUNISM vs. RELIGION

### INTRODUCTION

Sixty years ago, the seizure of Russia at the time of the Bolshevik Revolution established for the first time a power base for atheistic communism to begin the drive for its ultimate goal of a one-world totalitarian government based on Marxist-Leninist principles. In the early days of building the international communist movement, the communist propagandists around the world were not hesitant in making it clear that communism was the mortal enemy of Christianity, Judaism, Mohammedanism and all other religions that believed in a Supreme Being. It was not unusual to see anti-religious communist posters and caricatures such as the one which boasted, "We will tear God out of the skies".

Here are a few of the statements that communist leaders were repeating in the early days: "It is not religion that creates man, but man who creates religion. . . It is the opium of the people (Karl Marx). "Religion is a kind of spiritual gin" (V. I. Lenin) "In my outlook on life there is no place for religion" (William Z. Foster, Chairman Emeritus of the Communist party, USA. "We remain the atheists we have always been" (Nikita Khrushchev.) (1)

As communist propaganda became more and more refined, the communist leaders began to realize that religious beliefs were deeply ingrained in the human consciousness and not as easily uprooted as thought, so they began to adopt new tactics, playing down their outspoken antipathy toward religion. They began to make overtures of conciliation and openly invited religious leaders to engage in both dialogue and collaboration with the communists.

This change in communist tactics has been highly successful, since very few organized religious bodies today will publicly criticize communist atheistic philosophy or even raise questions regarding the persecution of Christians and believers inside communist controlled countries.

I sincerely hope the following information will help explain the current paradoxical relationship in the struggle between communism and religion. The outcome of this struggle should be of grave importance to every sincere Christian and believer in our turbulent world.



## **BACKGROUND**

I am convinced that it is now the 11th hour and the time for Christians and believers to recognize the imminent dangers which now threaten our great country. The actual survival of our Judaic-Christian principles and heritage on which our country was founded is now at stake. If prompt steps are not taken to rebuild the resolve of all Americans, our country, which has been the main bulwark for preserving the liberty of the non-communist world, will continue on its current badly divided, demoralized and confused path and by default we will end up a part of a one-world atheistic communist society.

Let's look at the facts so we can put the entire picture in proper perspective.

### **Extent of Communist Control in the World Today.**

Already twenty-one formerly free and independent countries are now under complete communist domination. To refresh your recollection, these are the 21 countries and the year in which they lost their freedom to authoritarian communist control:

Albania	1944	Latvia	1944
Bulgaria	1944	Lithuania	1944
Cambodia	1975	Mongolian People's Republic	1945
China (Peoples Republic of)	1945	Poland	1945
Cuba	1959	Rumania	1947
Czechoslovakia	1948	Tibet	1951
Estonia	1944	U.S.S.R.	1917
East Germany	1945	North Vietnam	1954
Hungary	1944	South Vietnam	1975
North Korea	1945	Yugoslavia	1945
Laos	1975		(2,3)

### **Any Chance of Freeing a Communist Controlled Country?**

Are you aware that these 21 communist controlled countries now comprise 1/3 of the peoples of the world and ¼ of the land surface? What is so frightening is that in not one country once it has been seized and forged into a communist dictatorship has it ever been overthrown from within. Uprising were attempted by brave self-sacrificing people in Poland in 1956, in Hungary in 1956 and in Czechoslovakia in 1968, but their efforts to regain their freedom were short lived and these uprisings were brutally suppressed by overwhelming communist forces. The ever vigilant oppressive internal police forces and the extensive block and factory spy reporting systems make it virtually impossible for any real opposition to develop. Constant communist political indoctrination is the order of the day. Any dissident voices are quickly silenced.

## Communist Propaganda Helps to Prepare way for Communist Takeovers

Many of the communist takeovers of countries have been made easier because of the pro-communist propaganda being served up daily by the mass communications media.

Do you remember how Cuba under Batista was constantly criticized and how much better a Cuba under a liberating Castro would be? Do you recall the tremendous propaganda campaign involving China wherein the "red agrarian reformers from the north" under Mao Tse-tung were praised while the so-called "China Warlords" under General Chiang Kai-shek were constantly condemned. All during the Vietnam war there was the constant carping against the "corrupt generals" government of South Vietnam until finally most Americans sadly if not willingly accepted the communist Vietcong victory as the lesser of two evils.

In fact the pro-communist "one-way street" type propaganda continues unabated and keeps pouring out vitriolic statements against so-called "military dictatorships" in South Korea, Chile, Argentina and other non-communist countries throughout the world making them appear so undemocratic that even a communist takeover will be a blessing. However very seldom is there ever a mention of the violations of human rights under equally hated communist dictatorships.

## Past American Attempts to Prevent Communist Takeovers under Vicious Attack.

It has been a cardinal sin against American interests for any Agency of our government to provide aid of any kind to any country that is in danger of being overthrown by militant communists forces even though the leadership of that country asks or begs for such aid.

Witness the one-sided Congressional hearings which have vigorously condemned past American assistance in such countries as Chile, Dominican Republic, Ghana and Indonesia even though the evidence indicated that such American assistance probably played a part in preventing the communist takeover.

## Why Should We as Christians and Believers be Concerned by the Growing Communist Successes Throughout the World?

First of all, if we are sincere Christians and believers we should know that basic Marxist-Leninist philosophy is atheistic and therefore is the very antithesis of Christian beliefs and philosophy. Communist teachings clearly state that "Nature is all, there is no God", "The body is all, there is no soul" and "All religions are false and harmful and should be destroyed". A communist controlled one-world government will effectively spell the end of all religious freedom.

### Do not the Constitutions of Communist Countries Provide for Freedom of Religion?

Anyone interested in determining the true facts will discover that the Soviet constitution theoretically guarantees "freedom of religion". But this is nullified in actual practice by a whole series of concrete countermeasures "including wholesale confiscation of church property, the all pervasive state supervision of residual religious activity and the imprisonment of recalcitrant clergymen".

The Soviet law goes further and prohibits any activity on the part of churchmen or church associations aimed at winning over "new cadres of working people especially children" to a religious viewpoint. Such propaganda "shall be considered as a violation of laws on freedom of conscience and prosecuted in accordance with criminal and civil laws". While "religious propaganda" either inside or outside a church building is a punishable offense, anti-religious propagandizing is not only "free" for all citizens but is one of the prime duties of Communist Party members and government agencies. (4)

### Why Do Not Organized Religious Bodies in the United States Protest the Persecutions of Believers Inside Communist Countries?

I honestly cannot understand this obvious paradox of silence on the part of our great church organizations. I have been an active Methodist for more than fifty years and have naturally been more than upset that the Methodist Church Leadership with more than 10,000,000 members appears to carefully avoid registering concern publicly over the persecution of believers inside communist controlled countries.

Not only have the Methodists failed to speak out against the ever increasing communist drive to subjugate the entire world under atheistic communism but almost all of the Protestant church bodies as well as the Catholic Church in recent years have failed to openly face the problem. Only Jewish believers, Baptists and Jehovah's Witnesses are seriously involved today in religious confrontation activity inside the Soviet Union and many of their heroic leaders are languishing in Soviet Labor camps or are being subjected to various types of inhuman treatment in Soviet insane asylums.

### How Widespread is the Persecution of Believers Inside the Soviet Union?

"Amnesty International" a human rights group accuses the Soviets of holding at least 10,000 political, religious prisoners. (5)

The knowledge of persecution of Christians and believers in the Soviet Union is becoming more widely recognized. Why the mass communications media in this country does not publicize this information is still another paradox.

Late in July 1976, Rep. John Buchanan (R. Ala.) had 103 co-sponsors in the House of Representatives for his resolution calling on the Soviet government to allow Christians and other religious believers to "worship God freely according to their own conscience". This was the first initiative to put Congress on record against the persecution of Christians in the Soviet Union. The "sense of Congress" resolution was finally passed in the House by a vote of 381 to 2 and in the Senate by a voice vote on October 1, 1976. (15) (19)

On August 10, 1976, the policy making body of the World Council of Churches met in Geneva, Switzerland to consider religious freedom in light of a 92-page report charging that the Soviet Government continues to persecute religious believers. The report suggests that state persecutions of believers continues despite new Soviet assurances of religious freedom given in the Helsinki Agreement signed August 1, 1975. (16)

On December 17, 1976, the Texas-Methodist publication carried an editorial entitled "We should seek to insure human rights everywhere -- including USSR". The editorial further stated "If there was ever a reason for American Christians to remain silent about human oppression in communist controlled countries, the reason was nullified by the Helsinki Agreement of 1975".

The January 1977 issue of the Readers Digest carries an article entitled "The Helsinki Agreement: Russia's Shameful Record" which cites specific cases of religious persecutions.

#### Are There Other Free World Countries in Danger of Seizure by Communist?

If the communists have their way, there will be one country after another falling under communist control. Are you aware that there is an organized Communist Party in each of 72 Free World countries with each seeking the overthrow of their government? The Communist Parties in some of these countries have almost complete freedom of operations and in others their activities are partially or severely proscribed. (3)

#### What is the Situation in Some of the Leading Countries?

Italy has the largest Communist Party in the Free World with 1,700,000 members. In the May 1976 elections, the communists almost were voted into power. The communists now have 227 seats in the 630 seat Chamber of Deputies, a gain of 48 seats over the 1972 elections. In the 315 member Senate the communists won 116 a gain of 22 over the 1972 elections. The present mayor of Rome is a communist and communists now hold many important political posts throughout Italy. (3) (17)

The Communist Party of France claims to have 400,000 to 425,000 members, which makes it the second largest Communist Party in the non-communist world. The Communist Party of France received more than one-fifth of the 16 million votes cast in the 1973 elections and controls 74 of the 490 seats in the National Assembly. According to public-opinion polls nearly half of the French people would not oppose communist participation in the government but most object to the Party being given dominant power. (3) (17)

The Communist Party of Japan has an estimated membership of 370,000. In the national elections in 1972, it took 10.5% of the vote and close to 10% of the seats in both houses of the Diet. Communists hold more than 3,000 seats in local governments. The Communist newspaper, Akahata - Red Flag, sells 650,000 copies each weekday and 2.4 million every Sunday in a nation of 110 million people. (3) (17)

Mere Communist Party membership is certainly not the only criteria to determine how dangerous a Communist Party has become. For example as late as 1973, the estimate of membership of the CP of Portugal was only 1000 members. During the April 25, 1975 elections, the communists received only 12.5% of the Portuguese votes, yet following these elections, the strategically placed communists within the armed forces led an uprising and attempted to seize power by force. After a number of serious confrontations with the actual survival of the country in doubt, the key communists were finally removed from their strategic posts and Portugal has again settled down to an uneasy truce with its restless communist elements. (3) (6)

The Communist Party, USA had a membership of 74,000 in February 1947, however its membership thereafter declined steadily. The communist leaders now claim a membership of about 20,000 with the FBI placing the actual membership figure at a much lower level. Gus Hall, the General Secretary of the CP, USA ran for president of the United States in the 1972 elections and received 25,222 votes, however in the 1976 elections Hall again ran for president this time more than doubling his vote to 58, 689. The Communist Party, USA cannot be considered a dangerous subversive threat by itself. The real threat from communists inside the United States lies in the fact that the CP, USA is completely subservient and loyal to the CP of the Soviet Union and is working toward the overthrow of our government with the assistance of the CP of the Soviet Union. (7) (8)

#### Comparative Strength of the United States with the Soviet Union.

Most of the qualified military and defense experts including former Secretary of Defense, James R. Schlesinger, now warn that the Soviet

Union is almost on an equal parity with the United States insofar as the total military and defense establishment is concerned and in some areas (such as the Navy) the Soviet Union is ahead. Not only has the Soviet military threat become so awesome but any further weakening of our country's defense capabilities will place it in serious jeopardy. A somber recent national intelligence estimate reportedly warns our national leaders that the long range goal of the Soviet Union is no longer mere parity but that it is seeking superiority over the United States.

(9) (14)

### Why is the United States Losing Strength While the Soviet Union Grows Stronger?

There appears to be a conscious and relentless effort inside the United States to cut the outlays for our national defense in every area and to attack, weaken and demoralize our key intelligence agencies responsible for protecting the internal security of our country. Most Americans, I am sure are not aware how far this decimation of our protective forces has gone.

Many of our laws that were designed to be used against subversive elements have been declared unconstitutional and others have been so weakened that effective action under them appears to be impossible or impractical. We sorely need new laws under which the criminal subversive elements can be investigated and prosecuted. Terrorism and subversive tactics change and effective laws should keep pace with these changes.

Within the past four years, the Internal Security Division of the Justice Department has been abolished. The Subversive Activities Control Board was dismantled. The Attorney General's List of Subversive Organization was eliminated. On January 14, 1975, the House Internal Security Committee was abolished.

The Intelligence Community was especially distraught over the long drawn out open hearings conducted by the Senate Select Committee headed by Senator Frank Church and the House Special Committee headed by Rep. Otis Pike. The principal targets of these hearings were the CIA and the FBI. Even the Washington Post in an editorial on November 19, 1975, admitted that "Mr. Pike goes too far". The Soviet intelligence KGB officers undoubtedly were jubilant as the daily highly publicized hearings dragged on and as the intelligence gathering capabilities of the CIA and FBI were obviously being dealt irreparable injury.

Attorney General Edward Levi in March, 1976, promulgated new domestic security "guidelines" which in effect make it virtually impossible for the FBI to have a truly effective internal security capability.

The Levi "guidelines" prohibit the FBI from probing any group at all unless it has evidence the organization has violated a federal statute or was planning a violation that threatened grave harm and was likely to take place in the near future. On September 22, 1976, FBI Director Clarence Kelley revealed that because of these "guidelines" the FBI had been forced to reduce its security cases from 21,414 in July 1973 to a present 626 cases which included 78 organizations and 548 individuals. (10)

In early December 1976, Attorney General Levi found it necessary to bend his arbitrary earlier "guidelines". After the FBI revealed close contact between agents of the Soviet Union and the Communist Party, USA, Mr. Levi decided that the "guidelines" for FBI foreign intelligence investigations (which understandably are secret) apply to the Communist Party, USA and he approved continuing FBI surveillance of the Communist Party, USA, thereby taking the CP, USA out of the domestic category and placing it in the foreign intelligence field of investigations. (10)

#### **Importance of a Sound Foreign Policy for our Country**

The late Walter Lippmann one of the most respected writers on Foreign Affairs that journalism has produced in this century, said that U. S. Foreign Policy is the "Shield of the Republic". A sound Foreign Policy is therefore the shield that protects the fortunes, liberties, and lives of all our people. The direction of our Foreign Policy should be of extreme interest to every American. His future way of life may well depend on it. (11)

#### **Is There a Possible or Plausible Explanation as to Why Important Decisions on U. S. Foreign Policy in Recent Years Seem to Shift Toward the Left and Pro-communist Position?**

I have recently read four books all having a central theme, one of which is entitled, "The Invisible Government", by Dan Smoot. The theme running through these four books is that the Council on Foreign Relations, a non-government organization appears to have tremendous power and influence in the formulation of changes in our Foreign Policy which seem to support or accommodate the communist position, when there is a confrontation between the ideologies and policies of communist countries, and those of the United States. (12)

Briefly the background and activities of the Council on Foreign Relations (CFR) can be summarized as follows:

The Council on Foreign Relations was incorporated in New York City in 1921, and began to grow and increase in prestige in 1927, when the Rockefeller family began to pour money into it, followed by large

financial infusions by the Carnegie Foundation and the Ford Foundation. Reportedly, the CFR has been able to mould and influence the thinking of many of its members to such a degree that the CFR and not the Federal Government is in control of formulating this country's Foreign Policy,

The 1400 resident and non-resident members of the CFR not only represent all religious faiths but they occupy top positions in the fields of: finance, government, business, labor, military, education and the mass communications media. The CFR roster reads like a who's who of the elite in America. (13)

The official quarterly publication of the CFR is the widely read periodical called "Foreign Affairs." In addition to its publications, the CFR holds semi-secret dinner meetings, and hosts briefings and seminars through which the CFR is able to sell its views on foreign policy to carefully selected participants, who because of their background, wealth and political potential in this country could be expected to become potent boosters of the CFR Foreign Policy positions. (12) (13)

The author of the book, "The Invisible Government" made it clear that he did not intend to imply that the CFR is or ever was a communist controlled organization. He did state:

"The fact, however, that communists, Soviet espionage agents, and pro-communists could work inconspicuously for many years as influential members of the Council indicates something very significant about the Council's objectives. The ultimate aim of the Council on Foreign Relations (however well intentioned its prominent and powerful members may be) is the same as the ultimate aim of international communism; to create a one-world socialist system and make the United States an official part of it". (13)

My fear is that many of these prestigious members of the CFR have now come to believe that a one-world government based on some form of socialism (such as Fabian socialism) would ultimately bring about a much better society of world government than the hodge podge systems we have now. They are sadly aware that in our current unhappy world, we have Catholics and Protestants still fighting in Northern Ireland, until recently Christians and Moslems had been fighting for 19 months in Lebanon, left-oriented terrorist groups are on the increase and murdering innocent victims every day and for far too long, hunger, disease and poverty have made miserable the lives of a large proportion of the world inhabitants, not to mention the inability of law enforcement agencies to adequately cope with the crime situation.

What I can't understand is, why these elite, well educated, policy making, successful Americans, comprising the membership of the CFR,



are not pragmatic enough to know that the current communist leaders already in control of 1/3 of the peoples of the world will never relinquish their dogmatic Marxist-Leninist principles, which keep them in power for some milder form of world-wide socialism.

The current false promises of communist propaganda reminds me of the Scripture passages found in the New Testament, Matthew Chapter 4, wherein the story is told how Christ after fasting for 40 days and 40 nights was tempted by the devil. You will recall that the story relates that Christ was taken to the top of an exceeding high mountain and was shown all the kingdoms of the world and the glory in them. Then the devil tempted Christ by saying "All these things will I give unto you if thou wilt fall down and worship me." Christ replied: "Get thee hence Satan for it is written, thou shalt worship the Lord thy God and him only shalt thou serve."

Communist propaganda is acting in the role of a Satan-type tempter today by falsely offering weary Christians and believers a peaceful, better, all fulfilling world. In return communism demands that all Christians and believers will have to do, is to give up their religious beliefs and become a part of a cold world of communist inhumanity, sterility and conformity where the bodies, minds and souls of men become as stone, lifeless in the darkness of atheistic perversity. (18)

There is hope that as more and more people begin to speak out against Soviet persecution of Christians and believers, the American people will begin to see the true basic nature of communist philosophy. Hopefully our political and religious leaders will become inspired to the type of moral and sustaining leadership necessary for our country to throw back the forces of reaction and repel the evil dream of a communist totalitarian atheistic world. It is hoped that one of the first steps will be a recognition of the obvious truth that violations of human rights and persecution for religious beliefs are just as bad, if not more relentless, in communist dominated countries as those being reported in so called military dictatorships or other ruthlessly run non-democratic countries. The leaders in our mass communications media must bring an end to the "one-way-street" reporting on human rights violations and focus equal attention on the violations taking place in the communist world wherein 1/3 of the peoples of the earth reside and who are also entitled to their basic human rights.

## BACKGROUND OF THE AUTHOR

Herman O. Bly was born in Virginia. He has a Juris Doctor degree from George Washington University and has been admitted to practice law in the District of Columbia, the State of Virginia and before the U. S. Supreme Court.

Mr. Bly served for 28 years in the Intelligence Service of the United States. Twenty-three of these years were with the Federal Bureau of Investigation (FBI) 17 at the FBI National Headquarters in Washington, D. C. His FBI assignments included two years as a key Special Agent charged with protecting the secrets of the Atomic bomb, from enemy agents, before it was exploded in New Mexico in 1945. While at FBI Headquarters, he was the supervisor in charge responsible for the operations of several key units directly involved with domestic communist and subversive activities on a national basis. During his 17 years at FBI Headquarters, Mr. Bly lectured regularly at the FBI Academy on Communism and related matters. He also served as a guest lecturer before classes of Naval Intelligence Officers at the Pentagon and before the Strategic Intelligence School.

Following his FBI career, Mr. Bly served for five years as a Senior Staff Officer at the Central Intelligence Agency, Langley, Virginia where he was directly involved in studies and operations relating to the International Communist Movement.

Mr. Bly is now retired and resides in Fort Myers, Florida.

## Index to Annotations

1. Christianity Today, October 24, 1960.
2. The World Almanac, 1974.
3. "World Strength of the Communist Party Organizations 25th Annual Report 1973 Edition" Prepared by the Bureau of Intelligence and Research, U. S. Dept. of State.
4. A Special Study "The Church and State Under Communism Part I, The USSR", prepared by the Law Library of the Library of Congress, 1964.
5. U. S. News and World Report, December 22, 1975, Page 7.
6. Washington Report, December, 1975, published by the American Security Council.
7. U. S. News and World Report, September 17, 1973, page 66.
8. Human Events, December 25, 1976, page 2.
9. Washington Report, February, 1976, published by the American Security Council.
10. Human Events, December 11, 1975, page 5.
11. Washington Report, August 1975, published by the American Security Council.
12. The other three books are:  
An Expose, Nixon and the CFR, by Phoebe Courtney (1971).  
The Naked Capitalist by W. Cleon Skousen (1971).  
Nixon -- The Man Behind the Mask by Gary Allen (1971).
13. The Invisible Government by Dan Smoot (1971).
14. Human Events, January 8, 1977, page 2.
15. Washington Post article entitled "Movement Grows in Congress for Soviet Christian Support", July 31, 1976.
16. Fort Myers News-Press, article entitled "Religious Persecution in Soviet Union Probed", August 11, 1976.
17. U. S. News and World Report, article entitled "Reprieve for Italy - But for How Long?", July 5, 1976.
18. A few phrases taken from the book "Communism and Christ", by Charles W. Lowry (1952).
19. Washington Post article, October 8, 1976, entitled "Congress Decries Soviet Christian Persecution."

POSTAGE

FROM:

TO:

3rd Class Mail

March 20, 1997

Mr. Herman O. Bly  
5315 Shalley Circle  
Fort Myers, Florida 33919-2211

Dear Mr. Bly:

Your March 10 letter to [redacted] of my staff  
has been received.

The FBI currently is conducting the necessary  
prepublication review of your book manuscript, "Communism--The  
20th Century Red Plague." Upon completion of that review, I will  
notify you of the results at the earliest possible date.

Thank you for your cooperation in submitting your  
proposed book for FBI review.

Sincerely yours,

/s/  
[redacted]  
Unit Chief  
Office of Public and  
Congressional Affairs

1 - [redacted]

NOTE: Due to the topic of the book, Mr. Bly's manuscript has been  
referred to NSD for in-depth review. Therefore, Mr. Bly is being  
furnished this interim response to his request.

BJC:bjc/wjr (5)

MAILED 60  
MAR 20 1997  
Dep. Dir. \_\_\_\_\_  
Chief of \_\_\_\_\_  
Staff \_\_\_\_\_  
Off. of Gen. \_\_\_\_\_  
Counsel \_\_\_\_\_  
Asst. Dir.: \_\_\_\_\_  
Crim. Inv. \_\_\_\_\_  
CJIS \_\_\_\_\_  
Finance \_\_\_\_\_  
Info. Res. \_\_\_\_\_  
Insp. \_\_\_\_\_  
Lab. \_\_\_\_\_  
National Sec. \_\_\_\_\_  
Personnel \_\_\_\_\_  
Training \_\_\_\_\_  
Off. of EEOA \_\_\_\_\_  
Off. of Public \_\_\_\_\_  
& Cong. Affs. \_\_\_\_\_  
Director's Office \_\_\_\_\_

MAIL ROOM

FBI/DOJ

Please return to Room 7350

Herman O. Bly  
5315 Shalley Cir.  
Fort Myers, FL 33919-2211

March 10, 1997

FBI Headquarters  
Attn: [redacted] Room 7350  
935 Pennsylvania Avenue N.W.  
Washington D.C. 20535

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b7c

Dear [redacted]

Persuant to our telephone conversation of March 7, 1997, I am enclosing a copy of my background and the 300 page manuscript of my book "Communism - The 20th Century Red Plague - The Unbelievable Story - Why Did 50 Million People Have To Die?".

The book is pro FBI and details the FBI fight against Marxist-Leninist communism. It provides an excellent history of communism and how it was allowed to develop into the most dangerous enemy the "free world" had ever faced. By 1979, Marxist-Leninist totalitarian communism had subjugated 50 countries representing 1/4 of the land surface and 1/3 of the people of the world.

I believe that my book will be an excellent sequel to Mr. Hoover's 1958 best seller "Masters of Deceit," which I helped to write for Mr. Hoover along with Fern Stukenbroeker. Readers of my book will have an enhanced opinion of the FBI and a greater appreciation of the dedicated work of the FBI during the period of the "cold war."

It is my hope the FBI will appreciate my efforts in writing this book and in setting the record straight concerning the FBI's counter-intelligence efforts in protecting the internal security of our beloved country.

Awaiting your reply with appreciation for your time and consideration. I remain

Sincerely yours,

Encls.

*Herman O. Bly*  
Herman O. Bly

ack let to  
Herman O. Bly  
dated 4/23/97  
BSC/uh

## BACKGROUND OF HERMAN O. BLY

Mr. Bly was born in Virginia in 1913; educated in the public schools at Winchester, Va; and has a Juris Doctor degree from George Washington University. He was admitted to the District of Columbia Bar in 1939, and the Virginia Bar in 1946. He has been admitted to practice before the United States Supreme Court and was a member of the Federal Bar Association until his retirement.

Mr. Bly's knowledge of communism began in 1940 when he became a Special Agent for the Federal Bureau of Investigation (FBI). During his 23 years in the FBI most of his service was directly involved in the investigations of the subversive elements within the United States. From 1943-1945 he was one of the key Special Agents in the New York Office of the FBI involved in the protection of the atomic bomb secrets from enemy agents prior to the first successful test in conjunction with the Manhattan Engineer Project.

In 1946, Mr. Bly was assigned to the FBI Headquarters in Washington, D.C. where he headed various key units within the Domestic Intelligence Division involved in the investigation of communist and other subversive organizations. During his 17 years of assignment at the FBI Headquarters he lectured regularly at the FBI Academy to Inservice Class Agents and to new Agents on subjects connected with communist activity. Mr. Bly also served as a guest lecturer on a number of occasions at the Naval Intelligence School at the Pentagon and at the Strategic Intelligence School in Washington, D.C.

In 1963, Mr. Bly retired from the FBI and shortly thereafter accepted a request to join the Central Intelligence Agency Headquarters in Mc Lean, Virginia, where he was assigned for five years as a Senior Staff Officer in the international communist areas of operation.

There are few men who have the academic background on international communism and who also have had the practical experience gained from working directly in the investigative and counter-intelligence fields of operations.

Following his retirement from Government Service, Mr. Bly has been a guest lecturer before more than 40 civic, Rotary and Lions Clubs, Lodge, Fraternity and Church organizations.

From January 1985 to November 1986, Mr. Bly wrote 54 articles for the "Lee Constitution" a weekly conservative newspaper published in Fort Myers, Fla. The circulation reached as high as 45,000 copies.

In June 1986, Mr. Bly gave a series of 3 weekly broadcasts over Radio Station WSOB in Fort Myers, Fla. on various phases of international communist activities.

During his retirement years, Mr. Bly has won four national awards from the Freedoms Foundation at Valley Forge, Pa. In 1976, he was awarded the George Washington Honor Medal for his speech "Communism vs. Christianity in a Turbulent World". In 1977 he was awarded the Valley Forge Honor Certificate for his follow-up speech "Communism vs. Religion". In 1979, he was awarded the George Washington Honor Medal for his guest editorial "Damage to U.S. Intelligence Agencies Endangers National Security" which appeared in the June 3, 1979 issue of the Fort Myers News-Press. In 1985, Mr. Bly won the Valley Forge Honor Certificate for his pamphlet "America at the Crossroads" containing the first 20 articles he wrote for the "Lee Constitution", weekly newspaper in Southwest Florida. These four awards are considered to be an outstanding achievement for dedication directed toward bringing about a better understanding of the "American Way of Life".

ed

Mr. Bly published a commentary in the April-May-June 1988 issue of (SMI) Sound Money Investor, a nationwide magazine published in Cocoa, Florida. This commentary disclosed the various disastrous foreign policy decisions which helped to elevate a relatively undeveloped country in the 1930's (the Soviet Union) into the most dangerous enemy our country and the Free World had ever faced.

Mr. Bly's commentary "Is the Soviet Threat for Real?" was published in the October-November 1988 issue of "The Sound Money Investor" magazine now being published in Winter Park, Florida.



(12/31/1995)

# FEDERAL BUREAU OF INVESTIGATION

**Precedence:** PRIORITY

**Date:** 03/19/1997

**To:** National Security

**From:** Office of Public and Congressional Affairs  
Research/Communications Unit, Room 7350  
**Contact:** [redacted] X3306

b6  
b7C

**Approved By:** Collingwood John E [redacted] pgs

DECLASSIFIED BY 60322 UC/LP/PLJ/JCF  
ON 11-28-2011

OGA info handled per letter dated  
11/22/11.

**Drafted By:** [redacted] bjc/wjr

**Case ID #:** 67-

**Title:** PREPUBLICATION REVIEW OF BOOK  
MANUSCRIPT, "COMMUNISM--THE 20TH  
CENTURY RED PLAGUE," BY FORMER  
SA HERMAN O. BLY

**Synopsis:** NSD is requested to conduct prepublication review of  
attached manuscript.

**Enclosures:** (3) Incoming letter, biographical sketch, manuscript

**Details:** By letter dated 3/10/97 (copy attached), Mr. Bly  
submitted his book manuscript to OPCA for prepublication review.  
Due to the subject of the text, OPCA requests NSD to review the  
proposed book and to **furnish the results of that review to OPCA's  
Research/Communications Unit, Room 7350, by noon, Monday,  
4/14/97.**

In conducting its review, NSD is requested to mark  
directly on the attached copy of the manuscript any information  
which requires revision or deletion to ensure that no data  
contained therein is:

- Sensitive compartmented or otherwise classified;
- Sensitive, including references to sensitive  
investigative techniques;
- Obtained exclusively through FBI employment where that  
information would not be available to the general  
public through such means as the Freedom of  
Information/Privacy Acts, the media, or court records;  
and/or
- Pertinent to or likely to impact on pending  
investigative or prosecutive matters.

SEE NSD ADDENDUM PAGE 3

To: National Security From: Office of Public and Congressional  
Affairs  
Re: 67-, 03/19/1997

NSD is requested to ensure that its response reaches  
OPCA's Research/Communications Unit, Room 7350, by noon, Monday,  
4/14/97. Response may be made by addendum, original memorandum,  
or EC. **In the event an EC is used, please ensure that a hard  
copy is furnished to Room 7350** inasmuch as ACS downloading  
capability is not yet available to this office.

Any questions may be directed to Unit Chief [ ]  
[ ] at Extension 5611 or to [ ] Extension 3306.

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Your cooperation in this matter is appreciated.

CC: [ ] - Enclosures (2)  
[ ] - Enclosures (2)

♦♦

*WSP EX/AN*  
ADDENDUM: NSD, NS-1B; MH/CSV; 4/15/97

(U) ~~XX~~ Former NSD SSA [redacted] who supervised the FBI investigation of the CPUSA, and who is now under FBI contract to the JFK Task Force, has reviewed the manuscript, "COMMUNISM--THE 20TH CENTURY RED PLAGUE," by former SA Herman O. Bly. The review indicates that the book is based primarily on public source materials which are set out in the bibliography or referred to directly in the text. Much is also based solely on commentary or analysis by the author. It is noted that former SA Bly was authorized by the FBI, while he was an FBI Headquarters supervisor, to make public speeches about the CPUSA to select audiences. He lists numerous speeches and written articles he has presented since retirement in 1963. The FBI's investigation of the CPUSA; its leadership, and numerous members, have been declassified and many CPUSA related files have previously been processed for release; therefore, there is much information even from the FBI files which is in the public realm. None of the information that appears in the manuscript about the CPUSA would be classified or otherwise withheld in a FOIA request.

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Mr. Bly needs to answer the following questions:

- A. On pages 107-109, mention is made of an SAC letter on report writing about the CPUSA. That letter has not been located to determine if it was ever processed for release; however, all information in the manuscript would be released if a request is made for it.
- B. On page 112, reference is made to "many courier systems were discontinued." If Mr. Bly obtained the information from John Barron's book about the SOLO operation or another public source there is no problem. Such information would now be released in a FOIA request.
- C. All named individuals on pages 147-163 have had their files processed for release or have been otherwise written about in public sources with the exception of a) [redacted] on page 158 and b) [redacted] on page 163. Mr Bly needs to advise of his source of the information on both these individuals. It is not believed information about them would have been processed for release by the FBI.
- D. On pages 255-257, Mr. Bly notes that he worked for the CIA and describes some of his work, therefore, CIA clearance should be obtained by Mr. Bly for publication of that information.

NSD concurs with [redacted] publication review and recommendations to clear up items A-D above.

April 23, 1997

b6  
b7C

Mr. Herman O. Bly  
5315 Shalley Circle  
Fort Myers, Florida 33919-2211

Dear Mr. Bly:

This will supplement my previous letter, dated  
March 20, 1997.

The FBI has completed its prepublication review of your  
proposed book, "Communism--The 20th Century Red Plague." Pages  
255 through 257 describe some of your work with the CIA.  
Therefore, if you have not already done so, you should submit the  
text for appropriate prepublication review by that agency.

On page 158 you discuss [redacted] and page 163  
includes information regarding [redacted]. Prior to  
submitting the manuscript for publication, you are being required  
to either omit those references from the text or notify me of the  
public source from which they were derived.

Your cooperation in connection with the FBI's  
prepublication review process is appreciated. Your manuscript is  
being returned to you.

Sincerely yours,

(s/  
[redacted]  
Unit Chief  
Office of Public and  
Congressional Affairs

Enclosure

1 - [redacted] - Enclosure

NOTE: Manuscript was referred to NSD for review by OPCA EC of  
3/19/97. NSD's 4/15/97 addendum set forth the concerns described  
in this outgoing letter.

BJC:bjc/wjr (5)  
Dep. Dir. \_\_\_\_\_  
Chief of \_\_\_\_\_  
Staff \_\_\_\_\_  
Off. of Gen. \_\_\_\_\_  
Counsel \_\_\_\_\_  
Asst. Dir.: \_\_\_\_\_  
Crim. Inv. \_\_\_\_\_  
CJIS \_\_\_\_\_  
Finance \_\_\_\_\_  
Info. Res. \_\_\_\_\_  
Insp. \_\_\_\_\_  
Lab. \_\_\_\_\_  
National Sec. \_\_\_\_\_  
Personnel \_\_\_\_\_  
Training \_\_\_\_\_  
Off. of EEOA \_\_\_\_\_  
Off. of Public \_\_\_\_\_  
& Cong. Affs. \_\_\_\_\_  
Director's Office \_\_\_\_\_

MAIL ROOM

FBI/DOJ

Please return to Room 7350

March 1, 1977

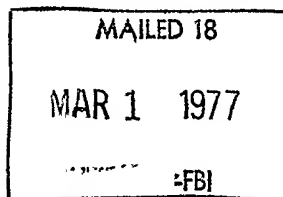
Pers. Rec. Unit

Mr. Herman O. Bly  
5315 Shalley Circle  
Whiskey Creek C. C. Estates  
Fort Myers, Florida 33901

Dear Mr. Bly:

You can indeed take pride in receiving the George Washington Honor Medal for your lecture, "Communism vs. Christianity in a Turbulent World," and I extend my sincere congratulations.

Thank you for your letter of February 21st and for furnishing me copies of "Communism vs. Religion." I am looking forward to reading it and am sure that its message will be not only meaningful but also timely. Your continued support of this Bureau and our efforts in the internal security field, as well as your best wishes, are certainly appreciated.



Sincerely yours,

C. M. Kelley

Clarence M. Kelley  
Director

NOTE: Mr. Bly is a former Special Agent who EOD 8/12/40 and retired 7/24/63. He is on the Bureau mailing list.

Assoc. Dir. \_\_\_\_\_  
Dep. AD Adm. \_\_\_\_\_  
Dep. AD Inv. \_\_\_\_\_  
Asst. Dir.:  
Adm. Serv. \_\_\_\_\_  
Ext. Affairs \_\_\_\_\_  
Fin. & Pers. \_\_\_\_\_  
Gen. Inv. \_\_\_\_\_  
Ident. \_\_\_\_\_  
Inspection \_\_\_\_\_  
Intell. \_\_\_\_\_  
Laboratory \_\_\_\_\_  
Legal Coun. \_\_\_\_\_  
Plan. & Eval. \_\_\_\_\_  
Rec. Mgnt. \_\_\_\_\_  
Spec. Inv. \_\_\_\_\_  
Training \_\_\_\_\_  
Telephone Rm. \_\_\_\_\_  
Director Sec'y \_\_\_\_\_

CAM:glb (3)

FBI  
COMMUNICATIONS SECTION  
REC'D  
MAR 1 1 04 PM '77

24 MAR 3 1977

MAIL ROOM ☒ TELETYPE UNIT ☒

BLY, HERMAN OLIN

67-99243

(SUBJECT)

(FILE NO.)

☐ ALL SERIALS, EXCEPT THOSE REMAINING IN FILE AND THOSE LISTED AS CHANGED ON THIS SHEET WERE "SKIPPED" OR WERE REMOVED FROM FILE AND DESTROYED IN ACCORDANCE WITH AUTHORITY CONTAINED IN

☐ FOLLOWING SERIALS WERE REMOVED FROM FILE AND DESTROYED IN ACCORDANCE WITH AUTHORITY CONTAINED IN

66-818-5388

1-3, 5-8, 11, 16, 18, 19, 21-25, 30, 32, 33, 35-53, 55-91, 93-110, 112, 113, 114, 115, 118-122, 124, 125, 127-130, 132, 135, 136, 138, 141-143, 145, 146, 148, 147, 150, 151-159, 164, 165, 170, 171, 175, 178-180, 182, 185-196, 198-199, 201, 203, 206-208, 210, 213, 214, 216, 217, 219, 220, 222-226, 228-236, 238, 239, 240

(TAB CARD IN THE NUMBERING UNIT  
INDICATES ACTION TAKEN)

DATE 1-24-77

INITIALS N.A.

March 28, 1950

PERSONAL AND CONFIDENTIAL

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

The Bureau is in receipt of the report of the physical examination afforded you at the United States Naval Hospital, Bethesda, Maryland, on March 10, 1950.

This report reflects that you have no disqualifying physical defects and that the electrocardiogram was within normal limits.

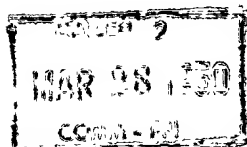
The Board of Examining Physicians of the United States Naval Hospital reports that you are capable of performing strenuous physical exertion and have no physical defects that would interfere with your participation in raids or other work involving the practical use of firearms.

Sincerely yours,

John Edgar Hoover  
Director

CC-Mr. Belmont  
HLE:cmn

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Nichols \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Harbo \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Nease \_\_\_\_\_  
Gandy \_\_\_\_\_



RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

NAME Rly, Herman O. AGE 36 YEARS, 7 MONTHS  
NATIVITY (state of birth) Virginia MARRIED, SINGLE, WIDOWED: Married NUMBER OF CHILDREN 0  
FAMILY HISTORY Father died age 51 (cerebral hem.). Mother age 65, in good health.

HISTORY OF ILLNESS OR INJURY Usual childhood diseases. Tonsils removed in 1938. Strep. throat-1938.

HEAD AND FACE Normal

EYES: PUPILS (size, shape, reaction to light and distance, etc.) Normal

DISTANT VISION RT. 20/20, corrected to 20/

LT. 20/20, corrected to 20/

COLOR PERCEPTION Normal

(state edition of Stilling's plates or Lamps used)

DISEASE OR ANATOMICAL DEFECTS Normal

EARS: HEARING RT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH 15'

LT. WHISPERED VOICE 15/15' CONVERSATIONAL SPEECH 15'

DISEASE OR DEFECTS Normal

NOSE Normal

(Disease or anatomical defect, obstruction, etc. State degree)

SINUSES Normal

TONGUE, PALATE, PHARYNX, LARYNX, TONSILS Normal

TEETH AND GUMS (disease or anatomical defect) NO

MISSING TEETH 1-13-16-17-32

NONVITAL TEETH no

PERIAPICAL DISEASE no

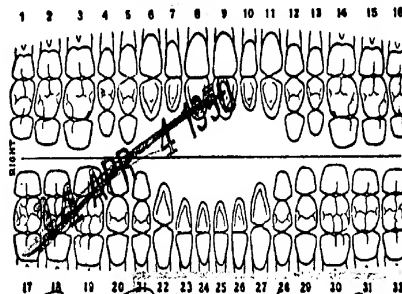
MARKED MALOCCLUSION no

PYORRHEA ALVEOLARIS no

TEETH REPLACED BY BRIDGES no

DENTURES no

REMARKS



*Joe R. R. R.*  
(Signature of Dental Officer) 9

GENERAL BUILD AND APPEARANCE

TEMPERATURE 99.2 CHEST AT EXPIRATION 35

HEIGHT 69 1/2 CHEST AT INSPIRATION 38

WEIGHT 157 CIRCUMFERENCE OF ABDOMEN AT UMBILICUS 33

RECENT GAIN OR LOSS, AMOUNT AND CAUSE Normal

SKIN, HAIR, AND GLANDS Normal

NECK (abnormalities, thyroid gland, trachea, larynx) Normal

SPINE AND EXTREMITIES (bones, joints, muscles, feet) Normal

35

*Joe R. R. R.*  
3/28/41



THORAX (size, shape, movement, rib cage, mediastinum) Normal  
RESPIRATORY SYSTEM, BRONCHI, LUNGS, PLEURA, ETC.

X-Ray Chest-neg.

CARDIO-VASCULAR SYSTEM Normal

HEART (note all signs of cardiac involvement) Normal

PULSE: BEFORE EXERCISE 72

AFTER EXERCISE 92

THREE MINUTES AFTER 68

CONDITION OF ARTERIES Good

CONDITION OF VEINS Good

BLOOD PRESSURE: SYSTOLIC 112  
DIASTOLIC 74

CHARACTER OF PULSE Good

HEMORRHOIDS None

ABDOMEN AND PELVIS (condition of wall, scars, herniae, abnormality of viscera) Normal

GENITO-URINARY SYSTEM Normal

URINALYSIS: SP. GR. 1.030 ALB. neg. SUGAR neg. MICROSCOPICAL neg.

VENEREAL DISEASE None

NERVOUS SYSTEM Normal

(organic or functional disorders)

ROMBERG Negative INCOORDINATION (gait, speech) Normal

REFLEXES, SUPERFICIAL Normal DEEP (knee, ankle, elbow) Normal TREMORS

SEROLOGICAL TESTS Kahn-neg. BLOOD TYPE O Rh Factor-neg.

ABNORMAL PSYCHE (neurasthenia, psychasthenia, depression, instability, worries)

None

SMALLPOX VACCINATION: DATE OF LAST VACCINATION

TYPHOID PROPHYLAXIS: NUMBER OF COURSES

DATE OF LAST COURSE

REMARKS ON ABNORMALITIES NOT OTHERWISE NOTED OR SUFFICIENTLY DESCRIBED ABOVE

ECG - within normal limits.

SUMMARY OF DEFECTS

CAPABLE OF PERFORMING DUTIES INVOLVING Arduous PHYSICAL EXERTION

IS THIS INDIVIDUAL PHYSICALLY FIT TO PARTICIPATE IN RAIDS AND APPREHENSION OF CRIMINALS  
WHICH MIGHT ENTAIL THE PRACTICAL USE OF FIREARMS Yes (yes or no)

(when no is given state cause)

FINDINGS, RECOMMENDATIONS AND REMARKS (as per boards, when necessary)

D. E. Billman

DATE OF EXAMINATION 3-10-58

May 16, 1951

~~PERSONAL AND CONFIDENTIAL~~

0  
Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

The Bureau is in receipt of the report of the physical examination afforded you at the United States Naval Hospital, Bethesda, Maryland, on April 12, 1951.

This report reflects that you have no disqualifying physical defects.

The electrocardiogram afforded you in this connection was found to be within normal limits.

The Board of Examining Physicians of the United States Naval Hospital reports that you are capable of performing strenuous physical exertion and have no physical defects that would interfere with your participation in raids or other work involving the practical use of firearms.

Sincerely yours,

John Edgar Hoover

Director  
FBI

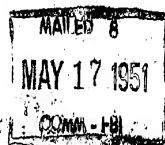
RECEIVED - MAY 17 1951

MAY 15 3 53 PM '51

CC-Mr. Belmont ~~(P & M)~~

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Nichols \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Harbo \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Nease \_\_\_\_\_  
Gandy \_\_\_\_\_

HLE:JLR



RECEIVED READING ROOM  
FBI  
U.S. DEPT. OF JUSTICE  
MAY 16 3 31 PM '51

VW

*[Handwritten signature]*

*[Handwritten initials]*

RECORD OF PHYSICAL EXAMINATION OF OFFICERS AND SPECIAL AGENTS  
FEDERAL BUREAU OF INVESTIGATION, U. S. DEPARTMENT OF JUSTICE

CC-270  
(1-1-50)

NAME ELY, Herman. O. AGE 37 YEARS, 9 MONTHS  
NATIVITY (state of birth) Va. MARRIED, SINGLE, WIDOWED: M NUMBER OF CHILDREN       
FAMILY HISTORY Father deceased - cerebral hemorrhage. Mother living and well.

HISTORY OF ILLNESS OR INJURY Usual childhood diseases. Tonsillectomy 1938.

HEAD AND FACE Neg.

EYES: PUPILS (size, shape, reaction to light and distance, etc.) Neg.

DISTANT VISION RT. 20/13, corrected to 20/

LT. 20/15, corrected to 20/

COLOR PERCEPTION ACC 1940 Normal

(state edition of Stilling's plates or Lamps used)

DISEASE OR ANATOMICAL DEFECTS None

EARS: HEARING RT. WHISPERED VOICE 15 /15' CONVERSATIONAL SPEECH 15 /15'

LT. WHISPERED VOICE 15 /15' CONVERSATIONAL SPEECH 15 /15'

DISEASE OR DEFECTS None

NOSE Neg.

(Disease or anatomical defect, obstruction, etc. State degree)

SINUSES Neg.

TONGUE, PALATE, PHARYNX, LARYNX, TONSILS Neg.

TEETH AND GUMS (disease or anatomical defect):

MISSING TEETH as indicated.

NONVITAL TEETH     

PERIAPICAL DISEASE     

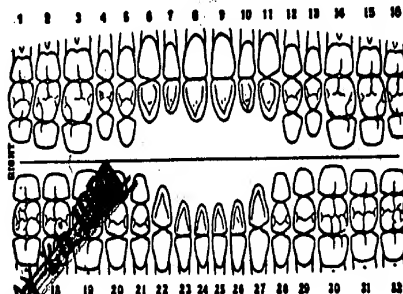
MARKED MALOCCLUSION     

PYORRHEA ALVEOLARIS     

TEETH REPLACED BY BRIDGES     

DENTURES     

REMARKS     



S. A. Grady, Lcdr. (DC) USN

(Signature of Dental Officer)

GENERAL BUILD AND APPEARANCE Robust

TEMPERATURE     

CHEST AT EXPIRATION 35

HEIGHT 71

CHEST AT INSPIRATION 39

WEIGHT 163

CIRCUMFERENCE OF ABDOMEN AT UMBILICUS 32 90

RECENT GAIN OR LOSS, AMOUNT AND CAUSE None

SKIN, HAIR, AND GLANDS Neg.

NECK (abnormalities, thyroid gland, trachea, larynx) Neg.

SPINE AND EXTREMITIES (bones, joints, muscles, feet) Neg.

33

3-7-50

THORAX (size, shape, movement) rib cage, mediastinum) Neg.  
 RESPIRATORY SYSTEM, BRONCHI, LUNGS, PLEURA, ETC. Neg.  
 Chest X-Ray - Neg.  
 RADIO-VASCULAR SYSTEM Neg.  
 HEART (note all signs of cardiac involvement) Neg.  
 ECG - within normal limits.  
 PULSE: BEFORE EXERCISE 80 BLOOD PRESSURE: SYSTOLIC 117  
 AFTER EXERCISE 100 DIASTOLIC 74  
 THREE MINUTES AFTER 80  
 CONDITION OF ARTERIES Neg. CHARACTER OF PULSE Regular  
 CONDITION OF VEINS Neg. HEMORRHOIDS None  
 ABDOMEN AND PELVIS (condition of wall, scars, herniae, abnormality of viscera) Neg.  
 GENITO-URINARY SYSTEM Neg.  
 URINALYSIS: SP. GR. 1.011 ALB. Neg. SUGAR Neg. MICROSCOPICAL Neg.  
 VENEREAL DISEASE Neg.  
 NERVOUS SYSTEM Neg.  
 (organic or functional disorders)  
 ROMBERG Neg. INCOORDINATION (gait, speech) Neg.  
 REFLEXES, SUPERFICIAL Neg. DEEP (knee, ankle, elbow) Neg. TREMORS Neg.  
 SEROLOGICAL TESTS Neg. BLOOD TYPE O Positive  
 ABNORMAL PSYCHE (neurasthenia, psychasthenia, depression, instability, worries) No  
 SMALLPOX VACCINATION: DATE OF LAST VACCINATION 1943(?)  
 TYPHOID PROPHYLAXIS: NUMBER OF COURSES 3  
 DATE OF LAST COURSE 1943  
 REMARKS ON ABNORMALITIES NOT OTHERWISE NOTED OR SUFFICIENTLY DESCRIBED ABOVE  
 SUMMARY OF DEFECTS  
 CAPABLE OF PERFORMING DUTIES INVOLVING strenuous PHYSICAL EXERTION  
 IS THIS INDIVIDUAL PHYSICALLY FIT TO PARTICIPATE IN RAIDS AND APPREHENSION OF CRIMINALS  
 WHICH MIGHT ENTAIL THE PRACTICAL USE OF FIREARMS yes (yes or no)  
 (when no is given state cause)  
 FINDINGS, RECOMMENDATIONS AND REMARKS (as per boards, when necessary)  
N. S. A. on P. E.  
 DATE OF EXAMINATION April 12, 1951 C. F. Park  
 EMPLOYEE'S INITIALS                      Cdr (MC) USN  
                     April 22, 1951

March 11, 1954

Personal and ~~Confidential~~

Mr. Herman C. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

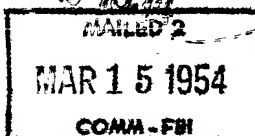
You rendered valuable service  
to the Bureau in connection with the  
preparation last week of material on the  
Nationalist Party of Puerto Rico.

I want to commend you at this  
time and tell you that I appreciate very  
much the untiring devotion to duty you  
displayed, particularly with respect to  
your contribution of many hours of volun-  
tary overtime. Such genuine concern for  
the Bureau's interests is truly noteworthy.

Sincerely yours,  
J. Edgar Hoover

cc: Mr. Belmont  
(Personal Attention)

89-56  
MAR 22 1954  
Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Harbo \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Gearty \_\_\_\_\_  
Mohr \_\_\_\_\_  
Winterrowd \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Miss Gandy \_\_\_\_\_



March 30, 1954

Personal and ~~Confidential~~

(1)  
Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am aware that you are one of the agents who participated so effectively in the preparation of material on the Communist Party on March 24, 1954, and I want you to know of my satisfaction with your work.

It is especially gratifying to note the excellence of the work performed by you and your fellow agents in view of the limited time available for completion of the project. You demonstrated commendable ability and efficiency in handling your particular assignments.

Sincerely yours,

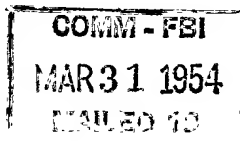
J. Edgar Hoover

cc: Mr. Belmont (Personal Attention)

LRH:rk  
67-99243

Tolson \_\_\_\_\_  
Ladd \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Clegg \_\_\_\_\_  
Glavin \_\_\_\_\_  
Harbo \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tracy \_\_\_\_\_  
Mohr \_\_\_\_\_  
Trotter \_\_\_\_\_  
Winterrowd \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Miss Gandy \_\_\_\_\_

APR 7 1954



RECEIVED  
MAR 30 3 14 PM '54  
67-99243-1  
H3  
MAR 31 1954  
MAR 31 1954  
MAR 31 1954

May 21, 1954

Personal and ~~Confidential~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am most appreciative of the valuable service you rendered to the Bureau by your assistance in the preparation of material for use during the recent meeting of the NATO Special Committee.

I want to commend you for the enthusiasm and good judgment you exercised in your discharge of this assignment. I want you to know I am aware of your splendid work in this instance and I am most pleased with such fine service to the Bureau.

Sincerely yours,

cc: Mr. Belmont (Personal Attention)

LRH:rk  
67-99243

MAY 21 10 03 PM '54

Tolson \_\_\_\_\_  
Boardman \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

MAY 24 12 04 PM '54  
U.S. DEPT. OF JUSTICE  
RECEIVED

COMM - FBI

MAILED 31

JUN 2 1954

MAY 24 12 04 PM '54  
U.S. DEPT. OF JUSTICE  
RECEIVED  
DIRECTOR

MAY 24 12 34 PM '54  
U.S. DEPT. OF JUSTICE  
RECEIVED  
DIRECTOR

August 3, 1955

Personal and ~~Confidential~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

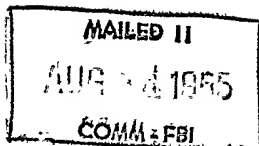
Dear Mr. Bly:

You are to be commended for the very capable manner in which you supervised at the Seat of Government the investigation conducted relative to the Jefferson School of Social Science matter.

You displayed excellent judgment in directing the activities of the field in this prolonged case and your splendid efforts contributed materially to the success achieved. I want you to know I deeply appreciate your valuable services.

Sincerely yours,

J. Edgar Hoover



cc: Mr. Belmont (Personal Attention)

Tolson \_\_\_\_\_  
Boardman \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Harbo \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
 Sizoo \_\_\_\_\_  
Winterrowd \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_

LRH:lrh  
(4)  
67-99243

RECORDED - 143

Based on memo Belmont to Boardman 7-27-55, HOB:pjm/13

53 AUG 11 1955

RECEIVED READING ROOM  
AUG 3 5 04 PM '55  
U.S. DEPT. OF JUSTICE

67-99243-172

*[Handwritten signatures and initials]*



August 18, 1955

Personal and ~~Confidential~~

Mr. Herman O. Bly  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Bly:

I am taking this means to advise you  
of my appreciation for your exemplary services  
in the preparation of reports for the NATO  
Special Committee.

It has been most gratifying to note  
the high calibre of these reports which have  
been prepared under your over-all supervision.  
It is a pleasure to commend you at this time  
for your competent performance.

Sincerely yours,

J. Edgar Hoover

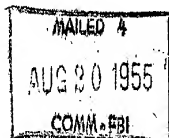
CC: Mr. Belmont (Personal Attention)

W/LRH:pl  
(4)

67-99243

Based on memo from Roach to Belmont 8-10-55 NWP:fjb

Tolson \_\_\_\_\_  
Boardman \_\_\_\_\_  
Nichols \_\_\_\_\_  
Belmont \_\_\_\_\_  
Harbo \_\_\_\_\_  
Mohr \_\_\_\_\_  
Parsons \_\_\_\_\_  
Rosen \_\_\_\_\_  
Tamm \_\_\_\_\_  
 Sizoo \_\_\_\_\_  
Winterrowd \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holloman \_\_\_\_\_  
Gandy \_\_\_\_\_



53 AUG 25 1955

RECEIVED READING ROOM  
AUG 18 5 57 PM '55

143

WV

Herman O. Bly  
5315 Shalley Circle  
Fort Myers, Fla. 33901

April 17

Assoc. Dir.	
Dep. AD Adm.	
Dep. AD Inv.	
Asst. Dir.:	
Admin.	
Comp. Syst.	
Ext. Affairs	
Gen. Inv.	
Ident.	
Inspection	
Intell.	
Laboratory	
Legal Coun.	
Plan. & Eval.	
Rec. Mgnt.	b6
Spec. Inv.	b7C
Training	

Mr. Clarence M. Kelley, Director  
Federal Bureau of Investigation  
U.S. Department of Justice  
Washington, D.C. 20535

Personal & Conf.

Dear Mr. Kelley:

As a former Special Agent of the FBI and one who was assigned almost exclusively to security work for the 23 years he was in the FBI, it is indeed a sad day to find it necessary to write to you as I am now doing. Believe me I am proud of my service in the FBI and find it almost incomprehensible that the FBI security phase of operations continues to remain under such devastating attack that ultimately these operations might conceivably be taken away from the FBI or so severely curtailed by guidelines or restricted by laws that the enemies of America will have almost complete freedom in their subversive operations.

If there ever was a time for counterattack, rebuttal or at least dialogue with the enemies of the FBI, it may have passed and I am afraid that it is now almost too late to repair much of the damage that has been done.

I sincerely believe that if top Bureau spokesmen would start to utilize the information in the FBI files (like the enemy has been doing) most of the right thinking Americans would again become strong supporters and proud of their FBI.

Probably no program of the FBI other than the mail openings and surreptitious entries has been under more blatant attack than the Counterintelligence Program which was in existence from 1956 to 1971. I strongly feel that if the American people really were told the true facts of the way this program was operated at least during the period 1956 to 1961 when I was responsible for same, most of these people would agree with the program and commend us for what we did.

As the Counterintelligence Program file will show, the program was the brainchild of William C. Sullivan who was finally dismissed by Director J. Edgar Hoover. It was approved in 1956 and Sullivan recommended that I be placed in charge. As the record will show, I had been the supervisor in charge of the Overthrow and Destruction of the Government Unit from 1947-1951 and 1953-1956 and in charge of the Smith Act of 1940 Unit from 1951-1953 which handled the gathering of evidence for the prosecution of Communist Party leaders around the country. Because of

Herman O. Bly  
5315 Shalley Circle  
Whiskey Creek C. C. Estates  
Fort Myers, Florida 33901

REC-14

5 JUN 1 1971

b6  
b7C

assignments, I was considered the most logical choice for supervising this new Unit.

The Counterintelligence Program was entered into by me most carefully and the file will show very clearly that the program was to disrupt and not to harass. Almost every letter to the field made this clear and in every lecture I gave, this statement was stressed. No action could be taken by a field office without complete clearance by Headquarters. Only one agent to a field office was assigned and only 12 field offices were selected to participate, which 12 offices covered approximately 90% of all the Communist Party, USA members. The program was directed initially against a revived Communist Party, USA, which had recently come out into the open after two years in underground type operations and at a time when the Soviet Union was brutally suppressing the anti-communist uprising in Hungary.

The Press constantly refers to the Counterintelligence Program as "COINTELPRO" as being some secret code-type operation. Why has not someone told the press that this name was only a short form for use in teletype communications where words are kept to a minimum and that every other case file in the FBI was likewise shortened for teletype communications?

The thing that infuriates me the most and which perhaps prompts this letter is that Attorney General Edward H. Levi may act favorably on a recommendation that the Attorney General or the FBI write letters to the "thousands of persons who were victims of FBI harassment" which in effect would apologize and spell out the tactics and actions used against them under the Counterintelligence Program. See the attached Washington Post articles dated March 31, 1976, "FBI Spy Apologies Weighed" and April 2, 1976, "FBI Acts to Notify Snooping Targets".

My fear is that these notifications will open Pandoras Box to law suits and restraining orders etc. against the FBI. These favorable actions toward subversive elements is a continuance of the liberal view of sympathy for the criminal and complete negative reactions to the suffering of the victims of crime.

I honestly feel that if immediate study and action is undertaken, the FBI could start showing that the targets of the Counterintelligence Program were not innocent victims of precocious FBI Agents out to get their jollies by harassing honest law abiding American citizens.

The Socialist Workers Party is one of the most persistent of the complainers of FBI harassment. If the long militant subversive background of this Trotskyite organization was publicized along with its blatant effort to persuade Americans that somehow it is a respected socialist-type organization, the American people would be convinced that if we had not followed the activities of this organization closely, we would have been guilty of non-feasance in office.

I am indeed sorry that this letter is so long but I have tried to put this situation in proper perspective. I am extremely distressed over the leftward trend of American politics and somehow feel that right thinking people must begin to speak out. In this regard, I am enclosing a copy of a speech entitled "Communism vs. Christianity in a Turbulent World", which I gave before the Methodist Men's Club of the First United Methodist Church in Fort Myers, Florida. The eighty men who heard this lecture strongly recommended that it be given wide dissemination. Considerable research and long experience went into the preparation of this lecture in an effort to highlight the international communism dangers in a different and hopefully more effective manner.

If there is anyway that I can be of help to the FBI, please feel free to call upon me. I am probably one of the best informed persons on the security phase of operations because of the 17 years at FBI headquarters in key supervisory positions. When I was called to FBI headquarters in 1946 there were 74,000 members of the Communist Party, USA which were more communists in the United States according to population than there were in the Soviet Union in 1917 at the time of the Bolshevik revolution. When I retired from the FBI in 1963 there were only about 5400 dues paying members of the Communist Party, USA and the Party had been almost completely discredited.

I have been retired in Fort Myers, Florida for three years and have no desire for publicity or to "make a name" for myself. I have only a desire to help restore the good name of the FBI in anyway I can be of service. My years in the FBI will always be treasured and I know that our work as Special Agents were prompted primarily because of our sincere patriotism and love of country. It is indeed a paradox that our activities are under such serious attack in this bicentennial year. I indeed fear for the future of our great country.

With kindest personal regards and with sincere hopes that the worst is over, I remain,

Sincerely yours,

*Herman O. Bly*  
Herman O. Bly

Ecn. 3

*Communism vs. Christianity  
in a turbulent world*

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By

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Tenor of Remarks

Lecture given at the monthly dinner meeting of the  
Methodist Men's Club  
First United Methodist Church  
Fort Myers, Florida  
January 27, 1976

ENCLOSURE

17-9921-141

## INTRODUCTION

In the early days of communism, most communist leaders were not hesitant in making it clear that communism was the mortal enemy of Christianity, Judaism, Mohammedanism and any other religion that believed in a Supreme Being. It was not unusual to see anti-religious communist posters and caricatures such as the one which boasted "We will tear God out of the skies."

Following the 7th World Congress of the Communist International held in Moscow in 1935, the communist leaders began to adopt new united front "tactics" while concealing their anti-religion "strategy". Communist "tactics" change, basic communist "strategy" does not change.

The new tactics involved launching a world-wide communist propaganda effort aimed at convincing the leaders of all religious bodies and organizations that they should accept the communist invitation to seek both dialogue and collaboration with the communists.

For example, the entire July 1966, issue of "Political Affairs", the theoretical journal of the Communist Party, USA, carried only articles on "Communism and Religion."

This forty year communist propaganda program has apparently been quite successful since very few organized religious bodies today will publicly criticize communist atheistic philosophy or even raise questions regarding the persecution of Christians and believers inside communist controlled countries.

The following information, I hope, will help to explain the current paradoxical relationship in the struggle between communism and Christianity. The outcome of this struggle is of grave importance to every sincere Christian and believer in our turbulent world.

## COMMUNISM vs. CHRISTIANITY IN A TURBULENT WORLD

# COMMUNISM vs. CHRISTIANITY IN A TURBULENT WORLD

## BACKGROUND

The phenomenal growth and greatness of our country during the past two hundred year history was primarily dependent upon and encouraged by the patriotism of its citizenry. Love of country had been deeply ingrained and nurtured in most Americans and prevailed up until the early 1960's. At that time patriotism began to falter and disaffection and disapproval of our government leaders and our American traditions began to surface. Our gradual and then deeper involvement in the "no win" war in South Vietnam, directed against communist aggression, began to construct heroes out of radical pro-communist revolutionaries. The chaotic situation enlarged to such an extent that the moral fiber of our country has become so severely strained and deeply mutilated that it now appears possible many Americans may never regain their trust and reliance and love of country essential to its survival in our current turbulent world.

I am convinced that it is now the 11th hour and the time for Christians and believers to recognize the imminent dangers which now threaten our great country. The actual survival of our Judaic-Christian principles and heritage on which our country was founded, is now at stake. If prompt steps are not taken to rebuild the resolve of all Americans, our country, which has been the main bulwark for preserving the liberty of the Free World, will become so badly divided, demoralized and confused that a one-world atheistic communist society will be the end result.

Lets look at the facts so we can put the entire picture in perspective.

### Extent of Communist Control in the World Today.

Already twenty-one formerly free and independent countries are now under complete communist domination. To refresh your recollection these are the 21 countries and the year in which they lost their freedom to authoritarian communist control:

Albania	1944	Latvia	1944
Bulgaria	1944	Lithuania	1944
Cambodia	1975	Mongolian People's Rep.	1945
China (People's Rep. of)	1949	Poland	1945
Cuba	1959	Rumania	1947
Czechoslovakia	1948	Tibet	1951
Estonia	1944	U.S.S.R.	1917
East Germany	1945	North Vietnam	1954

Hungary	1944	South Vietnam	1975
North Korea	1945	Yugoslavia	1945
Laos	1975		

(1., 2.)

### Sino-Soviet Dispute

The long smouldering dispute between the U.S.S.R. and Communist China broke out into the open in June 1960. This dispute is constantly used by pro-communists and sympathizers to help lure the leadership of the remaining countries in the Free World into a feeling of false security pointing out that since the International Communist Movement is no longer a monolithic organization under direct Kremlin control, international communism is no longer a real threat to the Free World. What these people are covering up is the fact that the leaders of both the U.S.S.R. and Communist China have never retracted or modified their often stated goal of working toward the establishment of a communist world based on differing views of Marxist-Leninist principles. This Sino-Soviet dispute is primarily then an open argument as to which country will emerge as the leader and who will ultimately provide the direction and control over the entire International Communist Movement.

Of the 21 countries already safely ensnared within the communist Bloc, 11 are in the pro-Soviet camp, 3 are in the Red China camp, two proclaim their independence and five are trying to steer a path of neutrality waiting to see which giant communist leader will emerge the victor in the Sino-Soviet dispute.

### Any Chance of Rescuing a Communist Controlled Country?

Are you aware that these 21 communist controlled countries now comprise 1/3 of the peoples of the world and 1/4 of the land surface? What is so frightening is that in not one country once it has been seized and forged into a communist dictatorship has it ever been overthrown from within. Uprisings were tried by brave self-sacrificing people in Poland in 1956, Hungary in 1956 and Czechoslovakia in 1968, but their attempts to regain their freedom were short lived and these uprisings were brutally suppressed by overwhelming communist forces. The ever vigilant oppressive internal police forces and the extensive block and factory spy reporting systems make it virtually impossible for any real opposition to develop. Constant communist political indoctrination is the order of the day. Any dissident voices are quickly silenced.

## Communist Propaganda Helps to Prepare Way for Communist Takeovers.

The minds of many Americans have been swayed by pro-communist propaganda appearing in the mass communications media. A threatened communist takeover has been more often praised, than condemned, by making rosy promises and offering benefits if the threatened communist seizure is successful, since it will ultimately bring about a much better government than its predecessor.

Do you remember how Cuba under Batista was criticized and how a Cuba under a liberating Castro was acclaimed? Do you recall the tremendous propaganda campaign favoring the communist "red agrarian reformers from the north" under Mao Tse-tung over the so called "China warlords" under General Chiang Kai-shek? More recently Americans became so weary, because of the one sided propaganda surrounding the Vietnam war, that they sadly if not willingly, have accepted the communist Vietcong victory over the former so called "corrupt generals" government of South Vietnam.

## Past American Attempts to Prevent Communist Takeovers Under Vicious Attack.

It would appear that it has been a cardinal sin against American interests for any Agency of our government to provide aid to any country that is in danger of being overthrown by militant communist forces even though the leadership of that country asks for such aid.

Witness the recent Congressional hearings, greatly magnified again by the one sided American press propaganda, which has vigorously condemned past American assistance in Chile, Dominican Republic, Ghana, Indonesia and Portugal even though the evidence indicated that such American assistance probably played a part in preventing the communist takeover.

## Why Should We as Christians be Concerned by the Growing Communist

## Successes Throughout the World?

First of all, if we are sincere Christians and believers we should know that basic Marxist-Leninist philosophy is atheistic and therefore is the very anti-thesis of Christian beliefs and philosophy. Communist teachings clearly state that "Nature is all, there is no God", "The body is all, there is no soul" and "All religions are false and harmful and should be destroyed."

## Do Not the Constitutions of Communist Countries Provide for Freedom of Religion?

Anyone interested in determining the true facts will discover that the Soviet constitution theoretically guarantees "freedom of religion." But this is nul-

lified in actual practice by a whole series of concrete counter-measures "including wholesale confiscation of church property, the all pervasive state supervision of residual religious activity and the imprisonment of recalcitrant clergymen."

The Soviet law goes further and prohibits any activity on the part of churchmen or church associations aimed at winning over "new cadres of working people especially children" to a religious viewpoint. Such propaganda says an official commentary, "shall be considered as a violation of laws on freedom of conscience and prosecuted in accordance with criminal and civil laws." While "religious propaganda" either inside or outside a church building is a punishable offense, anti-religious propagandizing is not only "free" for all citizens but is one of the prime duties of communist party members and government agencies. (3)

That religion has survived so many years of harassment and persecution in the Soviet Union and in other communist countries is a testimony to the power of faith. Some religions have been persecuted more viciously than others by the communists. There can be no doubt that the communists seek nothing less than the total liquidation of all vestiges of religion, while they continue to exploit these vestiges still struggling for survival in order to persuade the world that communism and religion are completely compatible. (3)

## Why do not Organized Religious Denominations in the United States Protest

## Persecutions of Christians inside Communist Countries?

I honestly cannot understand this obvious paradox of silence on the part of organized religious bodies inside the United States. I have been an active Methodist for more than fifty years and have naturally been more than upset that this great Methodist body of 10,000,000 members appears to carefully avoid registering concern publicly over the persecution of Christians in communist controlled countries.

## United Methodist Church Failure to Take Action.

I personally reviewed the voluminous proceedings of the General Conference of the United Methodist Church held in Atlanta, Georgia on April 17-28 1972. These conferences are held every four years at which time matters of concern of the church are raised and discussed in order, among other things, to chart possible changes in the social principles of the church. Numerous matters were raised in resolutions and discussions at this 1972 General Conference, but would you believe that nowhere in the record of this conference was there any adoption of an expression of dismay or protest against the persecution and jailing of Christians in communist countries?



My only hope at this point is that delegates to the next "General Conference" of the United Methodist Church scheduled for Portland, Oregon in April 1976, will adopt strong resolutions thereby laying the groundwork for the Church to take a stand against atheistic communism and the ruthless persecution of Christians and believers inside communist countries.

#### The Position of the World Council of Churches.

The World Council of Churches (WCC) which reportedly represents 286 denominations totalling 500 million non-Roman Catholic Christians around the world held its Fifth General Assembly in Nairobi, Kenya from November 23 - December 10, 1975, attended by 747 official delegates. These assemblies are held every seven years.

The World Council of Churches has been accused over the years of "selective indignation" denouncing capitalists in general and the United States in particular while overlooking evils elsewhere. When the WCC allowed the Russian Orthodox Church to join the Council in 1961, there was reportedly a tacit agreement to spare the delegates from Moscow any embarrassment and Soviet sins have gone unnoticed.

For two weeks the Assembly leaders at the Nairobi Conference were able to keep all efforts of criticism of the Soviet Union from reaching the floor for discussion. But during the final days an innocuous resolution praising the Helsinki Agreement of late August 1975, was responsible for raising the "taboo" question of Soviet religious persecutions.

Dr. Jacques Rossel, President of the Swiss Protestant Church Federation proposed an amendment to the resolution, expressing concern over religious repression "especially in the U.S.S.R." and asking that the Soviet Union honor its Helsinki pledge of freedom of conscience.

The Reverend Richard Holloway of Scotland in seconding the amendment stated: "I have observed that there is an unwritten rule that the Soviet Union must never be castigated in public. Nevertheless, it is well known that the U.S.S.R. is in the forefront of human rights violations. I think this tradition must end. The U.S.S.R. should take its place in the public confessional along with the rest of us from white, oppressive, imperialistic societies. We will gladly move over to make a place."

An emotional eruption of activity among the Russian delegates followed with Metropolitan Juvenaly of the Russian Orthodox Church telling the

Assembly: "I suddenly feel that I am no longer in a Christian fellowship. Members of a Christian fellowship should seek solutions to their problems in a spirit of Christian love. I would hate to see this Assembly pass a resolution which will give the world the impression that the WCC is a secular organization."

Metropolitan Nikodim, also of the Russian Orthodox Church followed by saying: "I feel that the WCC should not pass judgment on a specific situation without the facts being fully aired." He then appealed to the delegates not to vote on the amendment in order that "our fellowship may be preserved."

Under pressure of time, Assembly Moderator M. M. Thomas of India closed debate following the brief discussion and called for a vote while the Russian delegates frantically waved their hands asking to speak. The amendment apparently passed by a substantial majority.

On a point of order however, Mr. Thomas acknowledged that he had failed to follow WCC rules in cutting off debate without the Assembly voting to do so. A vote to cut off debate was ultimately taken and it failed to receive a two thirds majority (259 to 190) so the issue was left open to further debate.

To make a long story short, the matter of Soviet persecution of Christians came up for further discussion that evening at which session most of the twenty speakers were from churches in the Soviet Union and other Eastern European Countries. Finally a compromise was reached which softly urged further investigation of repression of human rights without criticizing the Soviet Union by name.

This Nairobi Conference of the WCC at least did provide for the first time a forum for open debate of the "unmentionable" subject of Soviet religious persecutions. Hopefully the organized church bodies in the United States will follow this beginning of the WCC by likewise publicly taking issue with the communists over religious persecutions in communist countries. (4. & 5.)  
How Widespread is the Persecution of Christians Inside the Soviet Union?

"Amnesty International" a human rights group accuses the Soviets of holding at least 10,000 political, religious prisoners. (6)

#### Are there Other Free World Countries in Danger of Seizure by Communists?

If the communists have their way, there will be one country after another falling under communist control. Did you know that at the present time there is a militantly organized communist party in each of 72 Free World countries with each seeking the overthrow of their governments? The

communist parties in many of these countries have almost complete freedom of operations and in others their activities are severely proscribed. (2)

#### Danger in Italy?

Italy has the largest Communist Party with 1,596,000 members. In the May 1972 elections, the communists received 27.2% of the Italian votes that were cast and were thereby awarded 179 seats in the Chamber of Deputies out of 630 seats. The communists are becoming such an open threat in Italy, that on December 15, 1975, the Council of the Italian Bishops of the Catholic Church, meeting in Rome, issued a statement that collaboration with Marxist movements is incompatible with Christianity because Marxist movements ignore "primary values in the integral vision of man, his history and relations with God" and consequently "lack credibility and lead inevitably to other forms of slavery." (2. & 12.)

#### Danger in France?

The Communist Party of France claims to have 400,000 to 425,000 members. In the June 1968, elections the CP of France obtained 20.03% of the French vote and gained control over 34 seats in the French National Assembly. (2)

The Communist Parties of Italy and France account for 90% of all the Communist Party members in the Free World. (2)

#### Danger in Other Countries?

The Communist Party of Japan has an estimated membership of 320,000, the CP of Finland 49,000 and the CP of Sweden 17,000 members. Mere Communist Party membership is certainly not the only criteria to determine how dangerous a Communist Party has become. For example as late as 1973, the best estimate of membership of the CP of Portugal was only 1000 members. During the April 25, 1975, elections, the communists received only 12.5% of the Portuguese votes, yet following these elections, the communists attempted to seize power by force through the leadership of strategically placed communists within the armed forces. After a number of serious confrontations with the actual survival of the country in doubt, the key communists were finally removed from their strategic posts and, Portugal has again settled down to an uneasy truce with its restless communist elements. (2. & 7.)

#### Communists Gain Political Control Over Nazareth.

On December 9, 1975, a coalition of communists and radicals scored an overwhelming victory in Nazareth, the hillside town where Christ spent the first thirty years of his life. The new Mayor elected was a 46 year

old Arab member of the Rakah Communist Party and a member of the Israeli Parliament. (8)

#### Communist Threat in the United States?

The Communist Party, U.S.A. which had a claimed membership of 74,000 in February 1947, claimed only a membership of about 20,000 in 1973. The CP, USA today cannot under any stretch of one's imagination be considered a dangerous subversive or political threat by itself. Gus Hall, the General Secretary of the CP, USA who ran for president of the United States in the 1972 elections received only 25,222 votes, when the communists were allowed on the ballot in 14 states and the District of Columbia. The real threat from communists inside the United States lies in the fact that the CP, USA is completely subservient and loyal to the CP of the Soviet Union and is working toward the overthrow of our government with the assistance of the CP of the Soviet Union.

Most of the qualified military and defense experts including former Secretary of Defense, James R. Schlesinger now warn that the Soviet Union is almost on an equal parity with the United States insofar as the total military and defense establishment is concerned and in some areas (such as the Navy) the Soviet Union is ahead. Not only has the Soviet military threat become so awesome but any further weakening of our country's defense capabilities will place it in serious jeopardy. (9)

#### Why is the United States Losing Strength While the Soviet Union Increases

#### Theirs?

There appears to be a conscious and relentless effort inside the United States to cut the outlays for our national defense in every area and to attack, weaken and demoralize our key Agencies of government responsible for protecting the internal security of our country from subversive forces both within and without our borders. In recent years many of our laws that were designed to be used against subversive elements have been declared unconstitutional and others have been so weakened that effective action under them appears to be impossible or impractical. Why are so many of our leaders in government, Congress and elsewhere, assisted by one sided propaganda in the mass communications media, plunging along a route toward national suicide? They seem to be preparing our populace for ultimate apathetic acceptance of the earlier advanced trial balloon slogan "better red than dead"?

## Importance of a Sound Foreign Policy for our Country.

The late Walter Lippmann, one of the most respected writers on Foreign Affairs that journalism has produced in this century, said that U.S. Foreign Policy is the "Shield of the Republic." A sound Foreign Policy is therefore the shield that protects the fortunes, liberties and lives of all our people. (14)

## Is There a Possible or Plausible Explanation for These Destructive Left Turns Being Forced on our Foreign Policy?

I have recently read four books all having a central theme, one of which is entitled, "The Invisible Government", by Dan Smoot. The theme running through these four books is that the Council on Foreign Relations, a non-government organization is a leading factor, by working skillfully behind the scenes, in the formulation of changes in our Foreign Policy, which seem to support or accomodate the communist position, when there is a confrontation between the ideologies and policies of communist countries, and those of the United States. (10)

Briefly the background and activities of the Council on Foreign Relations (CFR) can be summarized as follows:

The Council on Foreign Relations was incorporated in New York City in 1921, and began to grow and increase in prestige in 1927, when the Rockefeller family began to pour money into it, followed by large financial infusions by the Carnegie Foundation and the Ford Foundation. Reportedly, the CFR has been able to mould and influence the thinking of many of its members to such a degree that the CFR and not the Federal Government is in control of formulating this country's Foreign Policy. (10. & 13.)

The 1400 resident and non-resident members of the CFR not only represent all religious faiths but they occupy top positions in the following fields: finance, government, business, labor, military, education and the mass communications media. The CFR roster reads like a who's who of the elite in America. The official quarterly publication of the CFR is the widely read periodical called "Foreign Affairs." In addition to its publications, the CFR holds semi-secret dinner meetings, and hosts briefings and seminars through which the CFR is able to sell its views on foreign policy to carefully selected participants, who because of their background, wealth and political potential in this country could be expected to become potent boosters of the CFR foreign policy positions. (10. & 13.)

The author of the book, "The Invisible Government" made it clear that he did not intend to imply that the CFR is or ever was a communist organization. He did state:

"The fact, however, that communists, Soviet espionage agents, and pro-communists could work inconspicuously for many years as influential members of the Council indicates something very significant about the Council's objectives. The ultimate aim of the Council on Foreign Relations (however well intentioned its prominent and powerful members may be) is the same as the ultimate aim of international communism; to create a one-world socialist system and make the United States an official part of it". (13)

My fear is that many of these prestigious members of the CFR have now come to believe that a one-world government based on some form of socialism (not necessarily the type of communist principles espoused by the Communist Parties already in power in 21 countries) would ultimately bring about a much better form of world government than the hodge-podge we have now. They are sadly aware that in our current world, we have Catholics and Protestants fighting in Northern Ireland, Christians and Moslems fighting in Lebanon, left-oriented terrorist groups murdering innocent victims everyday and for far too long, hunger, disease and poverty have made miserable the lives of a large proportion of the world inhabitants, not to mention the constant rise in crime statistics year after year.

What I can't understand is, why these elite well educated and successful Americans, making up the membership of the CFR, are not pragmatic enough to know that the current communist leaders already in control of 1/3 of the peoples of the world will never relinquish their Marxist-Leninist principles, which keep them in power, for some milder form, of socialism? I believe that the CFR members should compare their knowledge obtained by their academic studies of the theories of communism and socialism which offer so many glowing promises of putting an end to wars, want and poverty throughout the world as well as assuring the well-being of all its citizens, with the knowledge they could obtain by making an equal intensive study of how communism is actually practiced inside the communist controlled dictatorships.

The current false promises of communism reminds me of the Scripture passages found in the New Testament, Matthew Chapter 4, wherein the story is told how Christ after fasting for 40 days and 40 nights was tempted by the

## BACKGROUND OF THE AUTHOR

devil. You will recall that the story relates that Christ was taken to the top of an exceeding high mountain and was shown all the kingdoms of the world and the glory in them. Then the devil tempted Christ by saying "All these things will I give unto you if thou wilt fall down and worship me." Christ replied: "Get thee hence Satan for it is written, thou shalt worship the Lord thy God and him only shalt thou serve."

Communist propaganda is acting in the role of a Satan-type tempter today by falsely offering weary Christians a peaceful, better, all fulfilling world. In return communism demands that all Christians and believers give up their religious beliefs and become a part of a cold world of communist inhumanity, sterility and conformity where the bodies, minds and souls of men become as stone, lifeless in the darkness of atheistic perversity. (11)

It may not be too late for us as Christians to recognize that America has before it the mightiest challenge and responsibility in its entire history. With the coordinated support of all our religious bodies, it is possible to give the moral and sustaining leadership necessary for our Country to throw back the forces of reaction and repel the evil dream of a communist totalitarian atheistic world. (11)

One last question: Will our Judaic-Christian Society survive or will it be supplanted by a communist society? The continued apathy of Christians and believers is the most powerful weapon in the hands of the communist leaders. Christians and believers must replace their apathy with unified resistance in order to bring to a halt this terrifying advance of totalitarian atheistic communism.

Herman O. Bly was born in Virginia. He has a Juris Doctor degree from George Washington University and has been admitted to practice law in the District of Columbia, the State of Virginia and before the U.S. Supreme Court.

Mr. Bly served for 28 years in the Intelligence Service of the United States. Twenty-three of these years were with the Federal Bureau of Investigation (FBI) 17 at the FBI National Headquarters in Washington, D.C. His FBI assignments included two years as a key Special Agent charged with protecting the secrets of the atomic bomb, from enemy agents, before it was exploded in New Mexico in 1945. While at FBI Headquarters, he was the supervisor in charge responsible for the operations of several key units directly involved with domestic communist and subversive activities on a national basis. During his 17 years at FBI Headquarters, Mr. Bly lectured regularly at the FBI Academy on Communism and related matters. He also served as a guest lecturer before classes of Naval Intelligence Officers at the Pentagon and before the Strategic Intelligence School.

Following his FBI career, Mr. Bly served for five years as a Senior Staff Office at the Central Intelligence Agency, Langley, Virginia where he was directly involved in studies and operations relating to the International Communist Movement.

### Index to Annotations

1. The World Almanac 1975
2. "World Strength of the Communist Party Organizations. 25th Annual Report, 1973 Edition". Prepared by Bureau of Intelligence and Research, U.S. Dept. of State.
3. A Special Study "The Church and State Under Communism" Part I, The USSR, prepared by the Law Library of the Library of Congress 1964.
4. Time Magazine article entitled "On the Fringe" under heading "Religion" dated December 22, 1975
5. The United Methodist Reporter, December 19, 1975  
(A TM/UMR Staff Special)
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8. Washington Post article entitled "Radicals Win in Nazareth; Jewish Israelis Stunned." December 11, 1975.
9. U.S. News and World Report, September 17, 1973, Page 66
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11. A few phrases were taken from the book, Communism and Christ by Charles W. Lowry (1952)
12. Washington Post article entitled "Italian Communist Successes Bring Attacks from the Church" Page A-14 December 17, 1975
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14. Washington Report, August 1975, published by the American Security Council.

# FBI Acts to Notify Snooping Targets

By John M. Goshko  
Washington Post Staff Writer

Attorney General Edward H. Levi announced yesterday that he has established a Justice Department committee to notify an estimated several hundred persons that they were targets of past FBI harassment tactics.

The notification program will apply to victims of covert counterintelligence programs carried out by the FBI between 1956 and 1971.

Cointelpro, as it was known within the FBI, was intended to disrupt militant political groups of the left and right and harass and discredit their members. In some instances, the FBI fabricated derogatory information about target individuals and sent it to their families and employers.

Levi's announcement said that notification will be made in cases where the Cointelpro activity was improper, where it may have caused harm to the individual and where the victims are not already aware that they were targets.

Those persons who are contacted will be advised that they may seek further information about their cases from the Justice Department if they wish.

Justice Department sources estimated that the specifications set by Levi would result in notifications going to "several hundred persons." They added that decisions on what persons meet the specifications will be made by the review committee, headed by Michael E. Shaheen Jr., head of the

department's Office of Professional Responsibility.

The sources said that the committee will review approximately 35,000 pages of material relating to Cointelpro and will contact those persons requiring notification as they are identified. The notifications, the sources said, will be made by mail, telephone or hand-delivered letter, depending on the circumstances of each case.

All requests from contacted individuals for further information will be treated as requests for government documents under the federal Freedom of Information Act, the sources added. However, the requests will be expedited.

The sources said that no decisions have been made yet about how to handle requests from individual victims for further action, such as destruction or correction of their Cointelpro files.

This point was cited yesterday by Rep. Bella S. Abzug (D-N.Y.), who criticized the plan for not giving victims an explicit chance to have their files purged of improper materials. She announced that the House Subcommittee on Government Operations and Individual Rights, which she heads, will hold hearings on the notification program on April 13.

## Brazil Buys Coffee

Agence France-Presse

LONGON, April 1—Brazil is believed to have bought half a million bags of coffee from Angola following the loss of 60 per cent of its last crop due to frost, according to trade sources here.